State Form 43207 (2-89)

Sylvester 4-21-91

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT RECEIVED MAY 1 8 1993

RECORD CENTER

WMD RORA

JFFICE MEMORANDUM

Stephen West

RELEASED 16-14 INDIANAPOLIS

NOT FOR PUBLIC VIEW

DATE: April 12, 1993

THRU: Karyl Schmidt

Harold Templin # 4/12/93

FROM:

TO:

Roger Koelpin 2/93

Plan Review & Permits Section

SUBJECT:

Review of Johnson Controls, Goshen, Elkhart County, 12/10/92 Site Investigation Report (IND009549593)

I have reviewed the Johnson Controls Site Investigation Report. The report summarizes their efforts in identifying sources of contamination, and that the contamination has migrated off site via ground water. Johnson Controls has gathered enough information about the area hydrogeology to identify on-site sources and that control of those sources of contamination should proceed as a priority.

Subsequent efforts should include monitoring of the plume off-As source controls are implemented, the plume should be monitored to see if it persists off-site. If the plume persists, more investigation is needed to determine the extent of plume. yet, the boundaries of the plume have not been identified.

RCRA regulations call for determination of the extent of contamination, and the rate of migration. Compliance with this requirement will be necessary at some point during closure of the regulated units that are at Johnson Controls. However, compliance with RCRA was not an objective of this review at this time given the voluntary nature of Johnson Controls' efforts.

RCRA 4A File Fayola Wright, US EPA, Region V

> OFFICE OF RCRA WASTE MANAGEMENT DIVISION EPA, REGION V

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT 4-27-91

INDIANAPOLIS 4-16-14 NOT FOR PUBLIC RELEASE

TICE MEMORANDUM

RECEIVED MAR 19 19 WITHIN DECEMBER 19 19 WITHING THE PROPERTY OF THE PROPERTY

RECORD CENTER Conflicace DATE: April 14, 1992

TO:

Steve West, PRPS

THRU: Karyl Schmidt (5 4-14-92 Harold Templin KS for HT 4-14-92

FROM:

Roger Koelpin, Geology

SUBJECT:

Review of Johnson Controls (IND009549593) Interim Site Investigation Report, and additional data submitted to IDEM during a meeting with staff on April 6, 1992, in Indianapolis.

Johnson Controls has initiated an investigation of ground water contamination. The Interim Report, and additional data, document findings of the early phase of the investigation. The investigation was a laudible first step by the facility to characterize the extent of contamination that has migrated offsite, in Goshen, Elkhart County, Indiana.

The effort submitted for review is adequate as a first step to determine the extent of off-site ground water contamination. More work remains to be done to meet the requirements of RCRA Facility Investigations, under corrective action. The facility's plan to address on-site sources of contamination is acceptable, however, the rate and extent of the plume's migration must also be determined to design a comprehensive remediation. Specific tasks that must be done to determine the rate and extent of contaminant migration include better characterization of the hydrogeology of the system to be remediated. Additional concerns that must be addressed include identification of potential receptors of contamination.

The first phase of the investigation falls short of determining the extent of the contaminant plume. The first phase results were evaluated for adequacy with respect to RCRA Corrective Action regulations that were proposed in the July 27, 1990, Federal Register, Vol. 55, #145, pgs. 30798-30884. The objectives of corrective action are stated on page 30804, Section V.B., Clean-up Goals for Corrective Action, Ground Water, "Potentially drinkable ground water would be cleaned up to levels safe for drinking throughout the contaminated plume, regardless of whether the water was in fact being consumed." A preceeding section allows that clean-up target levels are best established as part of the remedy selection process.

Johnson Controls indicated in the April 6, 1992, meeting, that hydraulic and biologic characterizations of the aquifer at the plant are next on their agenda. The characterizations at the

\*Not for Public Release (protected internal communications under IC 13-7-16-3(a)(4) or information not obtained under authority of, nor required, by state law).

RELEASED DATE 4-16-14 RIN \$ 2014-004820 INITIALS JULY

to tracking the plume. For example, pumping tests of the flow zones at the site could document the integrity of the aquitards. Then, provided that the aquitards tested at the site are correlatable west of MW-13, this information could be carried over to the west instead of having to be entirely redone. However, additional borings to the west tracking the plume are needed.

Additionally, it would be prudent for Johnson Controls to thoroughly research the number of water supply wells west of MW-13 through the Elkhart River floodplain. The severity of the contamination is a function of the type and number of potential receptors. The presence of domestic wells and public water supply wells in the affected area would constitute a significant concern. The IDEM Office of Water, Drinking Water Branch, Ground Water Section may be already have domestic water sampling results. Mr. Steve Roush is the Chief of the Groundwater Section, and should be contacted at 317-233-4175. Also, Ms. Jean Beauchamp of the Drinking Water Branch, Public Water Supply Section should be contacted in regard to the Goshen water supply system, and can be reached at 317-233-4187.

cc: Ms. Fayola Wright, US EPA, Region V 4A File, Elkhart Co., Johnson Controls DATE 4-16-14
RIN # 2014-004820
EVITALS W

### ENFORCEMENT SENSITIVE

#### HAZARDOUS WASTE ENFORCEMENT REFERRAL

10: Enforcement Section Hazardous Waste Management Branch Assigned: Date:	FROM:	Date: Chief	ግ
TRACKING INFORMATION (or submit CMEL) Originators Name: Initial Evaluation: Next (Follow-up) Evaluation Date: Evaluation Type (3 letter code): Evaluation Comment (60 character Timit)			ings.
			Diga.

#### FACILITY OR HANDLER DESCRIPTION:

Contact Person: Mv. Lee Heck

Firm Namo: Johnson Controls

Location: 1302 E. Monroest, Goslan IN

EPA I.D. No.: IND 009 549 593

Hazardous Haste Activities: Currently hold interin status until closure plan is approved ticlosure certified. At present, they operate 25 & LOG ((10.000) status of they generate several wastes as outlined in check lists and trip report.

Copy of inspection sheet requested ( ) yes ( ) no

#### SUMMARY OF CASE OR REFERRAL:

A Notice of Violation and Enforcement Follow Up inspection are recommended to verify return to compliance. See more specific recommendations attached to this checklist.

## SPECIFIC VIOLATIONS OR FINDINGS: (State Class I or Class II)

- 1. The designated Emergency Coordinator does not appear to be adequately familiar with information required to respond to an emergency (329 TAC3-18-6)
- 2. Numerous personnel training and record keeping inadequancies including: a) no job titles for the positions related to hazandons maste management

b) ro names of employees filling each job title

c) no job descriptions for each position related to Lazardous waste management d) no written description of the entire hazzardous maste management training curriculum, both introductory and continuing

e) records that demonstrate that all pertinent employees have completed their annual refresher training

f) questionable annual retresher training sufficiency L329 IAC 3-16-7)

3. The facility's written waste analysis plan is inadequate

t. Both the wastenater treatment plant + the 1,1,1-trichloroethane distillation unit satellite accumulation areas had more than 55 gallous of hazardors waste present without dating the excess amount.

(329 IAC3.9.5(c)(Z)) 5. There were 2 drums present in the WWTP satellite accumulation are orlich were lacking lids. (329 IAC 3-23-4(a))

6. There were 2 drums present in the 11 trichloroethare distillation satellite accumulation area which had funnels in them while not being filled, one of which had been overfilled and had waste solvent on top of the lid (324 IAC3.23-4 Ca)

7, 3 Druns of absorbert pads (FOOZ) in the hazzerdous waste storage building. racked dates of accomulation (329 IAC 3-9-5)

8. There were spent absorbert passpiled on some drums in the NE section of the plant.

9. Doorwastes containing >500ppm Lead were not recognized as Doo8 as well (329 IAC 3-7-2)

# SPECIFIC VIOLATIONS OR FINDINGS: (State Class I or Class II) CON

# LDR Violations

- 1. Adherence to storage prohibitions could not be verified for 3 druns of absorbert pads in the Lazardors wastestorage building because they larked accumulation dates (40 (FR 268,50 (a)(7))
- 2. Prohibition levels/treatment standards for California list constituents (HDCs, cyanides/ead) were not recognized in Dool + Dool wastes (40 CFR 268.7(a))
- 3. LDR notifications were not provided for wastest-eams containing California list constituents (40 CFR 268, 7(2))

### RECOMMENDED ORDER OR RESOLUTION:

A Notice of Violation is reconnended as is an Enforcement Follow U, inspection to verify that Johnson Controls returns to compliance for hamed violations.

Most The violations pertaining to personnel training and record keeping and proper container management are of particular concern because Hey represent repeat problems.

Thy do appear to be making a concerted effort at waste minimization.

They should continue to analyze the waste oil from the SOOgal. and 1000 jal. waste oil tanks to demonstrate that no RCRA wastes have been mixed in. This has been a problem in the

past and if it continues, would represent an 502 (tank storage)

which is not allowed by their present Part A. Also this tank is not inspected welkly now is it dated with start of

accumulation as mould be required if it were a RCRA tank.

the facility should prepare a new flow diagram for their waste mater treatment plant which shows how the process has changed as well as greater tetail than their present flow diagram shows. The practice of placing the decanted liquids into Foot - labelled drums seems incorrect and should be changed. (This is described further in the Trip Report)

#### OTHER RECOMMENDATIONS AND REMARKS:

Overall, if the facility were to tighter up their waste management practices and record keeping practices with ever a few more hours / week committed to this task, they could probably stay much closer to facility compliance.

REMEMBER ATTACHENTS AND DOCUMENTATION !!!!!!

Prepared by: Lal ato

#### U.S. ENVIRONMENTAL PROTECTION AGENCY

#### TECHNICAL ENFORCEMENT SUPPORT AT HAZARDOUS WASTE SITES

RCRA Inspection Referral Report for the November 26, 1990 Inspection Conducted at:

> JOHNSON CONTROLS GOSHEN, IN IND 009 549 593

Work Assignment No. R05039

CONTRACT NO. 68-W9-0007

TES X

Work Performed By:

METCALF & EDDY, INC.

85 W. Algonquin Road Arlington Heights, IL 60005 REGEIVED

Waste Management Division
U.S. EPA, REGION V





January 8, 1991

Ms. Ann Budich Work Assignment Manager U.S. Environmental Protection Agency 230 South Dearborn Street Chicago, Illinois 60604

Re:

TES X, WA No. R05039 - Indiana RCRA Inspections

**RCRA Inspection Referral Report** Johnson Controls (IND 009 549 593)

Dear Ms. Budich,

Enclosed is the RCRA Inspection Referral Report for Johnson Controls, Goshen, Indiana. A copy of the report, including the original checklists, has also been sent to Dennis Zawodni, Indiana Department of Environmental Management.

If you have any questions or comments, please call Gail Artrip at (708) 228-0900, or me at (312)427-8752.

Sincerely,

METCALF & EDDY, INC.

Susan Lorenz

Senior Environmental Scientist

cc:

Fred Norling Gail Artrip Jim Myers

**Document Control** 

# PREINSPECTION FILES AUDIT CHECKLIST

		•			DATE: 11	///
					BY: <u>ام</u> م	nes My
COMPANY	: Johnson	Controls, In	С.	-		Ç
LOCATIO	V: Goshen,	ElKart Courit	INT IN	diana		
	ND/009/540		1 /			
Type of	inspection: (G	TClos	sureCo	omplaint-	Other(pl	ease spec
A CENT	"D 8 t					
A. GENI	<u> </u>					
1.	FEDERAL NOTIF	ICATION ON FILE?	<u></u>	YES	NO	<u>NA</u>
2. 3.	FEDERAL PART	A ON FILE? REVIEWED? >-17-89	· •		<del></del>	_
4.	CONTINGENCY P	LAN REVIEWED? 6- as		$\stackrel{\checkmark}{\Rightarrow}$		
5. *6.	BIENNIAL REPO PART B PERMIT					
	*(Note any Sp	ecial Permit Cond	itions)		<del></del>	
Report	Commencs. Tay	+ 13 called on	5,92-	gg, onl	y last pag	je of 1-1
1						
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B. <u>NOT</u>	IFICATION DATA	(Notify type, was	te codes	listed,	etc.)	
						7, 18 ar
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Notific Plos,	ation sub PIQ1, 4002	mitted 8-18-	80: Fo	, 4 22	5,6,13 6,4228	, 4229
Notific Plos, Origin	ation sub PIQI, 4002 Na) Part	mitted 8-18- , 4154, 4156 A submitte	80: Fo , 4220 d 10-1	, 4 82 3 <b>4</b> - 80	5,6,13 6,4228	, 4229
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Notific Plos, Origin Revis Part	stion sub PIRI, 4002 Na) Part Son Part B called s	mitted 8-18- , 4154, 4156 A submitte A submitte 5.25-88 (Faci	80: Fo , 4220 d 10-1 ed 4-	, 4 22 , 4 22 <b>3 9 -</b> 80	5,6,13 6,4228 1,1 <sup>5+</sup> (exis	, 4229 10n 3-1
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	U.	FIST POSSIBLE MA	STE STREAMS	NOT LISTED	ON BIENNIAL REPORT	
	_/	YONE Found in	Filer			
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	:. 11				AY REQUIRE A PERMIT	
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	-				original Part	A 10-29-80
	F.	FEDERAL PART A (	Handling Cod	es) OB PAR	T R DEDMIT RESIDENT POY	+ A 3-82
isadn			tuna / mg oou	ca, on tak	T B PERMIT REVISEON Par	A 4-11-87
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. <del>.</del> БД		1. <u>502</u>	1100		Gallons	
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- <b>%</b> c	)	Sol	3),000		Gallono Bleubic yands)	- appears ) to be typos
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	G.	CLOSURE/POST CLOS	SURE /	•		
		1. Any Closed t	lošta. T£	المائية المائية	/ F- 1. 1-1. E	* ')
	ori	•			e: Not at time of t	
	Cli	sure flow for	RCRA unit	s received	989 as part of 3201 by IDEM deted 3.11	409-1-201
•	de	termined to be in	nadequati	- NOD (1	2.13-89)	B   WILST
	-		V			
						,
				•		
	Н.	COMPLIANCE HISTOR	ΣY	-		
		00.00 2277702 1120707				
		List past two ins	spections and	d enforcemen	nt actions (CO, NOV, VL,	WL)
		Date of inspection	on Act	ion type	Date of Action	
			Lett	er of	5.19-89	
		3-22.89	Con	npliance		MV m
		10-21-86	<u>N</u>	ov'	resolved 9.25.	ŕ
		1-10-85	j	VoV	returned to con	Mimce
					7-24-85	

Page \_

I. LIST UNRESOLVED ENFORCEMENT ACTIONS/VIOLATIONS
NONE found during file review
J. BRIEFLY SUMMARIZE PREVIOUS VIOLATIONS. NOTE IF THEY ARE REPEATS.  NOV-(1-10-85): in adequate inspection schedule, personnel training records; didn't file incirient report whin '5 days; inaccurrate operating record; open containers; no start of accumulation dates containers not marked "totardous waste".  NOV: 2-17-87 - inadequate personnel records repeat, container storage 75 over confectly, inadequate emergency equipment schedules.  K. LIST ANY ITEMS UNDER COMPLIANCE SCHEDULES WHICH ARE NOT YET COMPLETED OR NEED FIELD VERIFIED NONE Found during file review.
L. <u>COMMENTS</u> Facility originally notified in 8-18-80 as GITSD, Part 4 submitted 10-29.90, 1st revision 3-12-82, 2nd revision 4-11-87
Part B was called 5-25-88 closurt Plan submitted on 3-17-80
for storage units. NOD-issued by FREM on 12-13-89.
Check Sor exception hypardrus waste From foreign
Country.
0978M Kaw
8/4/88 Page

#### TSD - RCRA INSPECTION REPORT

EPA ID # TND 00954	4593 NAME Johnson Contro	ls
MAILING ADDRESS: 130	2 E. Monnoe St.	
LOCATION ADDRESS: S	hen, IN 46526 ame	
CONTACT: Lee Heck	PHONE: 219-53	3.2111
OWNERSHIP:	COUNTY: Elkhar	4
ACTIVITY: (This should re:	tive 3=Dead Mail 4=PCB 1 n-handler 2=Obsolete ID # 9=Supe t of business	acility)
TRANSPORTERS: Air	TRANSPORTER TSD V	Other
HAZARDOUS WASTE FUEL OFF SPEC USED OIL FUEL SPEC USED OIL FUEL MATR BURNING DEVISE	: Gen mktg burner other mktr : Gen mktg burner other mktr : : Util boiler Indus boiler	burner burner Indus furn
Person(s) interviewed:		Telephone:
Lee Heck	Manufacturing Engineer	219-533-2111
Inspector(s):	Agency:	Telephone:
Gail Artrip	U.S. EPA	(708)228-0900
Jim Myers .	U.S. EPA	(317)545-1073
Date of inspection:	26-40 Time of inspection:	

		error trocesses of trocess code	(EPA For	3510-3)		
S01 S03 S04 T01 T02		Container storage Tank storage Waste pile storage Surface impoundment storage Tank treatment Surface impoundment treatment	T03	Incinerator treatment Other treatment Injection well of Landfill dispose Land application Surface impounds	disposal al n disposal ment disposal	
RCRA from only I This	Indo	A process codes are listed above below: Their crig fart A include. Although this tank never went it. Johnson Coutrols presently has waste oil however on at least or be a recurring situation for then licate any hazardous waste procested from Part A of the facility in the larger on fart A. Technically in reneved from site. They new tanks do in licate any hazardous waste process from 3510-3 page 1 of 5) which	es a 1500 through for a 500 of a e occasion Their sses, by y's perm their old-	gal storage tank mal closure it was look gal. storage to was look for each for the has bad Fooling process code, while application.	(SC2) which stone is cleaned and rem ant which they cla rear mixed into it ( no SO2 rede na  nich have been (HWIMS 610) storing RCRA was tes	ned suntil
3)	40 RCRA Typ Ope	Form 3510-3 page 1 of 5) which CFR 265.1(c). Provide a brief face of the two of the NPDES permits of Operation, Products Manufaration, Concentrate on processe-hazardous)!	rational	e for the possible occided	le exclusion per under 40 (FR 26:	n c 5. /
Mai	nuf a	cturing & distribution of auto	on atic	(no trad ) - in	· (-	
2/4	cli	cal, hunidity insteads), for	O(ESLES	include pla	eting.	A STATE OF THE STA
acl	- 1 h ing	, painting, stamping, li	alt as	sembly team	28i4a	
	_		<i>.</i>	0 / 0	D	
4)	If a	any of the wastes are managed i se areas and utilize the provid	n the ma ed appen	oices.		<
				YES	<u>, 100</u>	
	A)	Weste Oil Fuel - Appendix A		·		
	B)	Lead Acid Batteries - Appendi	хВ		<u>v</u>	
	C)	Hazardous Waste Fuel - Append	ix C		<u> </u>	
	D)	Precious Metals - Appendix D			V	
	E)	Use Constituting Disposal - A	ppendix			·
	F)	Tanks			$\nu$	
	G)	IIsa and Management of Contri-		. /	/	

					YES	NO	
H) Ge	nerator Accumul	ation Append	ix		$\checkmark$	, and the second	
I) Wa	ste Pile				<del></del>	. <u> </u>	
J) Su	rface Impoundme	ent					·
K) La	ndfill						•
	us Waste						
O Plating Waste	- Foot	Source Whit zinc process	sludge	Rate 1/2 duu		Disposit: Michigan Dispos	ion
3 Trichloroethyle	he-Fool wa	degreasing still stefilings, shavi	bottoms	7drums	s/mo, fe	trachem Procession	g-Fuelblending
3 Floor Dry - 1,1,1 Tuch	to orthane (FCC2)	trun minor-spills	s anounderwise	ment 12%	rums/mo	1801-280, AK-1-	Vinaretia
MEK-FOC5  Frech-water-oilm	xeure (FOOZ)	Air condition		1 drus		Petrochen Prac	ssing-fuelblend
3 Waste Alcohol-FCO.	3 (Dovi)	Cleaning solu			-/mo		**
1 Naptha (Doc	1)	Parts Wash	245	4 drun	-s/3mo.	SzfetyKle	ex-recycling
(D) Czustics (DOZ	2)	(Listorical) from	م7سانيا .	hakn	our 2	Szfety Kle Michigan Dispos Cyanochom D	al-lawfill etroit treate
6) List al	l wastes not li	sted above.					
Waste	Proce	ess Generatin	g Rat	e	Dis	position	
waste oil	above-groun	Waste d tank	1000 g	al	Berreth	Oil-Mishan	aka
waste oil	above-grou		500 g	2		Oil-Mishau	<b></b>
empty drums	Luiplevin	1	histor	i		hen	
askestos	cleanup		histor	ical		Pisposal - M -3-90 last	Ī
PCBs	clean up		7-40 lz	25+	v	e G.E.	
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	<u>metal ha</u>	()			100000		<u>alm</u>
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	····		-				
						The second secon	
1/22/90 manifest	describes Doo	i maderial as:	3 also co	ntaini	y >50	Oppn Lca	
(Doos not sp	ecified)				5		
· · ·							

\*

	Waste Type	Generation Rate	How reclaimed & by Who	Quantity stored on Site
Α.				
В.				
8) 8	Hazardous Waste		-	
Ela.	On-Site Dry - Foo2	Amount	How Stored	Comments
144	Trichotosthano	8-55 galidrung	druns	Laz. weste bldg
" آرارا	Tricklorethane ant Pads-FOO2	13-55 gzl. druns	druns	
	- ww.TP filter-cake	6-55 gal. drums		4. 4.
		9		
F001 -	Trichlorosthylene	6-55 galidrung	druns	15 15 1
otknow	if RIRA) soldering flux - WWTP filter Eake		•	
FCO 6	- WWTP Filter Eake	5-5921. drums		in WWTP satellite accum
F001-	Trickors othylene	1-55 gal. drun		in degresser satiaccu
F002	- 1,1,1 7-1 Llo-024L20	4 3-55 gil. druns		in degrezion sat. acc
9)	Has the capacit		eas listed on the of actual storage (HWIMS 610)	Part A exceeded that
9)	Has the capacitallowed? List 329 IAC 3-38-2	ty of the storage are	of actual storage (HWIMS 610)	e capacity overages.
9) % <b>E</b> z	Has the capacitallowed? List 329 IAC 3-38-2	ty of the storage are the type and amount	of actual storage (HWIMS 610)  ay 5 torage) but	Part A exceeded that capacity overages.
9) 6 Ex	Has the capacitallowed? List 329 IAC 3-38-2 pacity has not book ation areas had 25	ty of the storage are the type and amount cen exceeded (<90 d	of actual storage (HWIMS 610) ay 5 turage) but	Part A exceeded that e capacity overages.  Some satellite  the no dates
9) 6 Ex	Has the capacitallowed? List 329 IAC 3-38-2  Pacity has not be ation areas had > 1  Indicate any TS on the facility occured)	ty of the storage are the type and amount  cen exceeded (90 d  55 gel. of western shows  50 activities which he map (for the purpose)	of actual storage (HWIMS 610)  ay 5 torage) but  ttorn storage w  have been omitted se of determining	Part A exceeded that a capacity overages.  Some satellite  the modates  from or are not clear
9) (Cremul:	Has the capacitallowed? List 329 IAC 3-38-2  Pacity has not be ation areas had > 1  Indicate any TS on the facility occured) (40 CFR 270.13	ty of the storage are the type and amount cen exceeded (400 d) 55 gzl. of waste in showing map (for the purpose and 329 IAC 3-34-4)	of actual storage (HWIMS 610)  ay 5 torage) but  t term storage w  have been omitted se of determining  (HWIMS 610)	Part A exceeded that e capacity overages.  Some satellite  the modates  from or are not cleatif expansion has
9) (Cumul:	Has the capacitallowed? List 329 IAC 3-38-2  pacity has not be ation areas had > 1  Indicate any Ts on the facility occured) (40 CFR 270.13  actual TSD actional of actual actual TSD actional of actual actu	ty of the storage are the type and amount  cen exceeded (<900 d)  55 gel. of western show  50 activities which they map (for the purpose  and 329 IAC 3-34-4)  entires are taking places	of actual storage (HWIMS 610)  ay 5 torage) but  t term storage w  have been omitted se of determining  (HWIMS 610)  at the facility. The	Part A exceeded that e capacity overages.  Some satellite  Ith no dates  from or are not cleatif expansion has
9) (Cumul:	Has the capacitallowed? List 329 IAC 3-38-2  pacity has not be ation areas had > 1  Indicate any Ts on the facility occured) (40 CFR 270.13  actual TSD actional of actual actual TSD actional of actual actu	ty of the storage are the type and amount  cen exceeded (<900 d)  55 gel. of western show  50 activities which they map (for the purpose  and 329 IAC 3-34-4)  entires are taking places	of actual storage (HWIMS 610)  ay 5 torage) but  t term storage w  have been omitted se of determining  (HWIMS 610)  at the facility. The	Part A exceeded that e capacity overages.  Some satellite  Ith no dates  from or are not cleatif expansion has
9) (Cumul:	Has the capacitallowed? List 329 IAC 3-38-2  pacity has not be ation areas had >5  Indicate any TS on the facility occured)  (40 CFR 270.13  actual TSD actional of actoring place of actoring p	ty of the storage are the type and amount  cen exceeded (<900 d)  55 gel. of western show  50 activities which they map (for the purpose  and 329 IAC 3-34-4)  entires are taking places	of actual storage (HWIMS 610)  ay 5 torage) but  that term storage we have been omitted se of determining  (HWIMS 610)  2t the facility. They exp, some of which explicitly the facility in	Part A exceeded that e capacity overages.  Some satellite  the modates  from or are not cleatif expansion has

particularly as it pertains to the closure activities and former 90t day storage activities was waste oil, not a RCRA waste. No RCRA tanks remain on site.

13)	Additional Comments:	,		
······································				
<del></del>		Statement of the second		
<del></del>				
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···			*	
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			, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
				·

			Standards (paperwork)			~			
1)	Has Bos	the Reg.	ional Administrator/Ennotified regarding:	vironmental	Managemen	et.	DP	NĪ	<u>NA</u>
	a.	Receipt	e of hazardous waste f 265.12(a) (329 IAC 3-	rom a foreign 16-3) (HWIM	1 source? 5 300)	-	www.	- Carridge	
	b.	Facilit	y expansion? 270.72(b) (329 IAC 3-	38-3) (HWTM	S 610)	*/		*#75********************	
	c.	Change	of owner or operator?	16 31 /					V
Co	ir este	roence	zetween Johnson Con	trols and I.	DEM W	as re	Vien.	 حرا د سر	dicati
at	= the	facility	has been modified fo	on origico.	figura	tion.	TLar	2 20	5 506
,Fu	sian a	bowl this	laulier but it se	ems to have	e keses	Str	z : 1 .L	ريورد و	3 30/2
						J(P)	eighte	Lec	7067
)	Gene	ral Wast	e Analysis:	(HWIM:	<b>s</b> 310)		-		
	a.	either the pro	owner or operator made and physical analys through testing of knows? 265.13(a)1 (329 IAC 3	is of the war owledge of $\frac{\partial f}{\partial x}$	<b>ໄ</b> Variation:	-0001.ti	lable on Mu	at the nail locate	d tim
	b.	waste a	e owner or operator h nalysis plan on file a 265.13(b) (329 IAC 3-	at the facili	ed ity?	-	<u>√</u> **		
		1. pa 2. te: 3. sau 4. fre	e waste analysis plan rameters (and rationa st methods mpling method for rep equency of analysis (	le for their resentative s and rationals	e cares		\ <u>\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\</u>		
		5. <u>of:</u> gei 6. Add	f-site only: waste a merators ditional waste analys	nalysis from is needed (wi	β.u. <b>en a</b>	. —	- <del>-</del> -		<del>\frac{1}{7}</del>
			in waste type or		irs)				
		<b>a.</b>	265.193 (329 IAC 3- (see above)						V
		b.	265.225 (329 IAC 3- (same as above)	-25-4) Impourk	ment	•	-		
			(						
		c.	265.252 (329 IAC 3	-26-3)Waste	Pile				<u> </u>
		c. đ.	265.252 (329 IAC 3- (same as above) 265.273 (329 IAC 3-			سيحت			<u> </u>
			265.252 (329 IAC 3 (same as above)	-27-3)Land T	reatment			*************	

		f. 265.375 (329 IAC 3-30-3)Thermal Treatment OK DF NI NA (same as above)
	÷	g. 265.402 (329 IAC 3-31-3)Other Treatment (same as above)
	·	
	c.	Does the waste analysis plan specify procedures for inspection and analysis of each movement of hazardous waste from off-site?
		40 CFR 265.13(c) (329 IAC 3-16-4)  No waste received from off-site  Is the waste analysis plan followed a constructive of the construction off-site
	đ.	Is the waste analysis plan followed? Nohe was available at
		1: Oran primi rorrowed? Twee was available at
•		time of inspection
3)	Owne	er or Operator Inspections: (HWIMS 320)
	a.	Does the owner or operator inspect the facility for deterioration, malfunctions, operator errors, and discharges of hazardous waste that may affect human health or the environment?  40 CFR 265.15(a) (329 IAC 3-16-6)
	b.	Does the owner or operator have an inspection schedule at the facility?  40 CFR 265.15(b)2 (329 IAC 3-16-6)
	c.	If so, does the schedule address the inspection of the following items: 40 CFR 265.15(b)1 (329 IAC 3-16-6)
		i. monitoring equipment?
		ii. safety and emergency equipment?
		iii. security devices (including fences)?
		iv. operating and structural equipment (ie. dikes, pumps, etc.)?
		v. type of problems to be looked for during the inspection (e.g. leaky fittings, defective pump, etc.)? 40 CFR 265.15(b)(2) (329 IAC 3-16-6)

		vi. inspection frequency (based upon the possi deterioration rate of the equipment)? 40 CFR 265.15(b)(4) (329 IAC 3-16-6)	ble V DF	<u>NI</u> <u>NA</u>
		vii. Must include:  1. Weekly container storage?	(<90-day)	
		(See 265.174) (329 IAC 3-23-5)  2. Daily and Weekly Tank Storage? (See 265.194) (329 IAC 3-24-4)  3. Daily freeboard and weekly dike insper for surface impoundments? (See 265.226) (329 IAC 3-25-5)		<u>×</u>
		4. Landfills, Thermal treatment, Chemica Physical, and Biological treatment she inspected as determined by deterior rate and daily at loading and unloadi areas (where spills are likely) [See 265.15(b)(4) (329 IAC 3-16-6)]	ould Tation	<u> </u>
•	đ.	Does Owner or Operator follow the written inspection schedule as outlined? 265.15(b)(1) (329 IAC 3-16-6)	V _	
	e.	Are areas subject to spills inspected daily when in use? 265.15(b)(4) (329 IAC 3-16-6)	· <del>V</del> _	<del>-</del> - — —
	f.	Does the owner or operator maintain an inspect: log or summary of owner or operator inspections 40 CFR 265.15(d) (329 IAC 3-16-6)	ion	
•	<b>g.</b>	Does the inspection log contain the following: 40 CFR 265.15(d) (329 IAC 3-16-6)	information	n:
		i. the date and time of the inspection?	4	
		ii. the name of the inspector?		

			<u>OK</u>	DF	NI	NA
		iii. a notation of the observations made?	$\sqrt{}$	attitude of the same of the sa	·	-talesta-oppose
		<pre>iv. the date and nature of any repairs or remedial actions?</pre>	$\underline{\checkmark}$	mid Parisher s. minus.	*********	
				·	···	<del></del>
· ************************************	:					
<del></del>			***************************************	<del></del>		
4)	Do p	ersonnel training records include: (HWIMS 330)			· · · · · · · · · · · · · · · · · · ·	
	a.	Job titles for the positions related to HWM 40 CFR 265.16(d)1 (329 IAC 3-16-7)	**************************************		***************************************	<del></del>
	b.	The name of the employees filling each job title 40 CFR 265.16(d)(1) (329 IAC 3-16-7)	e?		· .	·
	c.	Job descriptions including the required skills, education, or other qualifications and the dutie of the personnel assigned to the position?  40 CFR 265.16(d)2 (329 IAC 3-16-7)	es ——	. <u>V</u>	-Patricular	***************************************
inclu docum	Chec ide th ients)	k categories for which job titles/descriptions are supervisors of each category in that category w	re ava when r	ilabl eview	e (pl ing	ease
Inspe	ency ctors dkeep	coordinator Training coordinator Emergency Material handlers Container labelers Ma	respo anifes	nse p ters_	erson —	inel
	đ.	Description of both introductory and continuing training required for each job? 40 CFR 265.16(d)(3) (329 IAC 3-16-7)	<del></del>		· <del></del>	<del>-</del>
	Desc	ribe in general the type of training program in a	use at	the	faci	lity.
iere te awors Le tra	pid HL mater zining	at the initial training consists of a small spill res ial handling SCBA training, MSDS discussion and a introductory or continuing, was available for res	ponse ests. View.	No u	in up	film, desci
	e.	Records of training required in (d)?			/	

	r.	Did trai	facility personnel receive the required ning including:				
				<u>OK</u>	<u>DF</u>	NI	NA
		i)	classroom or on the job	***************************************	$\sqrt{}$	-	
		ii)	within 6 months of hire		<u>/</u>	****	
		iii)	annual review of training?		$\vee$		
	g.	pers empl	all training records maintained for current onnel and for at least three years for former oyees?	*****	V		
П.			FR 265.16(e) [329 IAC 3-16-7(e)]				
			which records are maintained makes verifica-				
			ecriving their introductory and especially				
train	1 - 4 ·	npis	sible. We were able to verify that at least	Some	of 4	e en	ploges
ave vo	ecervi	~ ZL	inual training.				, <u> </u>
CONTI	VGENC	Y PLAI	N AND EMERGENCY PROCEDURES (HWIMS 350)				,
1)	Does info	the (	Contingency Plan contain the following				
		a.	The actions facility personnel must take to comply with 265.51 (3-18-2) and 265.56 (3-18-7) in response to fires, explosions, or any unplanned release of hazardous waste? (If the owner has a Spill Prevention, Control, and Countermeasures (SP Plan, he needs only to amend that plan to incorporate hazardous waste management provi that are sufficient to comply with the requirements of this Part (as applicable).				
	Α.	depart	scription of arrangements agreed by local poletments, fire departments, hospitals, contractions and local emergency response teams to dinate emergency services. 329 IAC 3-18-3	ice tors,			
		i.	Names, addresses, and phone numbers of all persons qualified to act as emergency coordinators?	<u> </u>			
		ii.	A list of all emergency equipment at the facility which includes the location and physical description of each item on the list and a brief outline of its capabilities?	st <u>/</u>	-	-	

			iii.	An evacuation plan for facility personnel where there is a possibility that evacuation could necessary? (This plan must decribe signal(s to be used to begin evacuation, evacuation routes, and alternate evacuation routes.) 40 CFR 265.52(f) (329 IAC 3-18-3)	OK be )	<u>DF</u>	NI NI	<u>NA</u>
		2)	Emer	gency Coordinator:				
	01 2-		a.	Is the facility Emergency Coordinator identified? 40 CFR 265.52(d) (329 IAC 3-18-3)	_	- China belling	***************************************	-
contingent	5 1ª	ς\ -	b.	Is coordinator familiar with all aspects of site operation and emergency procedures? 40 CFR 265.55 (329 IAC 3-18-6)	· · · · · · · · · · · · · · · · · · ·	*		
(xxx 6)	L		c.	Does Emergency Coordinator have the authority to carry out the Contingency Plan? 40 CFR 265.55 (329 IAC 3-18-6)	<u>/</u>			<del></del>
	* :	Thee	herge	my coordinator is identified and has necessary and	لحدالح	n bu	st it	a pue t
		that	Len	an not be aquequately familiar with information	~ rea	o Suin	ed to	<del>- 1, -</del> 1
	1	respo nater	ials t	I an energency. No evidence that he has he				
	,	Prepar	ednes	s and Prevention				
			with facil	he owner or operator attempted to make arrangemen local authorities in case of an emergency at the ity?  R 265.37 (329 IAC 3-17-7) (HWIMS 340)	<u>/</u>			***************************************
	;		site	opies of the Contingency Plan available at the and local emergency organizations? R 265.53 (329 IAC 3-18-4) (HWIMS 350)	<u> </u>	<del></del>		
		3)	Emerg	ency Procedures				
			has t	emergency situation has occurred at this facility he Emergency Coordinator followed the emergency dures listed in 265.56 (329 IAC 3-18-7)?  (HWIMS 350)	Y,			<u> </u>
	-		<del></del>	hone has occurred				<del></del>
	-							
	-	· · · · · · · · · · · · · · · · · · ·				·		

#### MANIFEST SYSTEM, RECORDKEEPING, AND REPORTING:

1)	Use	of Manifest System:	(HWIMS 360)				
	a.	Does the facility follow to in 265.71 (3-19-2) for promanifest? (Particularly signed manifest back to the	xessing each sending a copy of the	<u>OK</u>	<u>DF</u>	NI	<u>NA</u>
		days after delivery.)					V
	b.	Are records of past shipme three (3) years? 40 CFR 265.71(b)5 (329 IAC		<del></del>		<del></del>	<u>√</u>
2)	mani days appl	the facility submitted copingests to the Department with after receiving hazardous ies to both Indiana's and communities and communities to both indiana's and communities to both indiana's and communities and communities to both indiana's and communities and communiti	thin five (5) working waste? (This requireme	ents			<u> </u>
3)	rega faci	the owner or operator meet ording manifest discrepancie lities only) FR 265.72 (329 IAC 3-19-3)	es? (Off-site		***************************************		<u>/</u>
4)	Unma (app	nifested Waste Reports: Dies only to Off-site facil	It Johnson Controls Lities) westers from off	does -site	hot Sour	νεŒ (e\$.	rive
	a.	Has the facility accepted an off-site generator sub (3-8-1) without a manifest 40 CFR 265.76 (329 IAC 3-1	any hazardous waste fr ject to 40 CFR 262.20 t or shipping paper?				/
	b.	If "a" is yes, provide the of the waste and a descriptype and date received for hazardous waste shipment.	ption of the quantity,	e 		•	***************************************
	c.	Has the facility submitted waste report)?	d 8700-13B (urmanifeste	d —	· • • • • • • • • • • • • • • • • • • •		
	· · · · · · · · · · · · · · · · · · ·						
5)	Clos	sure/Post Closure Is the closure plan avail 40 CFR 265.112(a) (329 IA	able for inspection?	losure"			a new
	b.	Is the post-closure plan (for disposal facilities 40 CFR 265.118(a) (329 IA	only)	on? 			<u> </u>
	c.	Has the closure cost and estimate been revised ann inflation.		Dec V	. 1989	****	

6)	Oper	ating	Record:	(HWIMS 370)	<u>OK</u>	DF	NI	NA
	a.		owner or operator have a c R 265.73(a)	perating record?			***************************************	<del></del>
	b.	Does recor	the owner or operator main od that contains the follow	ing information?	Facilia	tydos		
		i.	The method(s) and date(s) treatment, storage, or dis in 40 CFR 265 Appendix I (40 CFR 265.73(b)(1) (329 I	of each waste's sposal as required 329 IAC 3-32-2)?	waster from off-s	ceive site	at ·	tive of
Summa	arize 1	how th	ne facility tracks the meth	nod and date of TS	D act	ivity		Da.
Invent drun rec Notreath	tory loo Lord t	Lists Len li Lispos	date accumulated & into 6.9 sto when ficked up and include at takes place at this facility.	oday storage boldges manifest number No off-site wast	No >	- Cum 90 do	ulati ng sta	Ve orzgé.
			The location and quantity waste within the facility; shall be cross referenced manifest number if the was by manifest.) 40 CFR 265.73(b)(2) (329	of each hazardous? (This informat: to a specific ste was accompanie	ion	/		
Summa	arize 1	how th	ne facility tracks the loca	ation and quantity	y of w	aste.		
		5e e	note above					
·······	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·					·	<del></del>
		iii.	A map or diagram of each carea showing the location each hazardous waste? (The be cross referenced to spenumber, if accompanied by 40 CFR 265.73(b)(2) (329	and quantity of is information she ecific manifest a manifest.)	ould —			- <i>V</i>
	·	iv.	Records and results of al trial tests, monitoring d inspections? 40 CFR 265.73(b)(3)(5)(6)	ata, and operatin	g V	<u> </u>		now has
		v.	Reports detailing all inc implementation of the Con 40 CFR 265.73(b)(4) (329	tingency Plan?		<del>-</del>	_	occur
		vi.	•	ure costs as	Dec 198	9		
			applicable? 40 CFR 265.73(b)(7) (329	IAC 3-19-4)	<u>~</u>			

#### GROUNDWATER MONITORING

#### 40 CFR Subpart F

Complete this section for facilities that treat, store, or dispose of hazardous waste in landfills, surface impoundments and/or by land treatment.

	•	<u>OK</u>	<u>DF</u>	NI	<u>NA</u>
1)	Has the owner or operator of the facility implemented a groundwater monitoring system?  40 CFR 265.90(a) (329 IAC 3-20-1) (HWIMS 380)	MANAGEMENT AND STREET			V
2)	Has the owner or operator of the facility implemented an alternate groundwater monitoring system as describe in 265.90(d) (329 IAC 3-20-1)? (HWIMS 380)	eđ	<del></del>		V

#### APPENDIX GN

Complete this section if the owner or operator of a TSD facility also generates hazardous waste that is subsequently shipped off-site for treatment, storage, or disposal.

Manif	est F	Requirements:	(HWIMS 110)	OK	DF	NI	<u>NA</u>
1)	LOL	s the operator have copies of the mar review? CFR 262.40 (329 IAC 3-10-1)	nifest availabl	e /	l ≅i⊊assaaaa	-14-2-1	-
2)	Exam	sine manifests for shipments in past oximate number of manifested shipmen	6 months. Ind	icate peri	o₫	21	
3)	INTO	he manifest forms examined contain trmation. FR 262.21 (329 IAC 3-8-1)	the following				<del>_</del>
	a.	Manifest document number? EPA ID No. 5 digit No.? (A sequential number for all manife September 20, 1984, and a five digitalter September 20, 1984.)	este hafora	<u>√</u>	*2000		<del>-7</del>
	b.	Name, mailing address, telephone number of generator?	imber, and EPA	ID			
	c.	Name, telephone number (3-14-3) and of Transporter(s)?	i EPA ID Number	<u> </u>			
	đ.	Name, Address, telephone number (3- EPA ID Number of designated permitt	-14-3) and ed facility?	<u> </u>	· .		
	e.	The description of the waste(s) (DO DOT hazard class, DOT identification	OT shipping nam On number)?	e,		·	
	f.	The total quantity of waste(s) and number of containers loaded?	the type and	_			
	g.	Required certification?		$\checkmark$			
	h.	Required signatures?		$\angle$			
	i.	EPA hazardous waste number (3-14-3)	)?	1	· .	·	
				· ·			
			—— <del>——</del>				

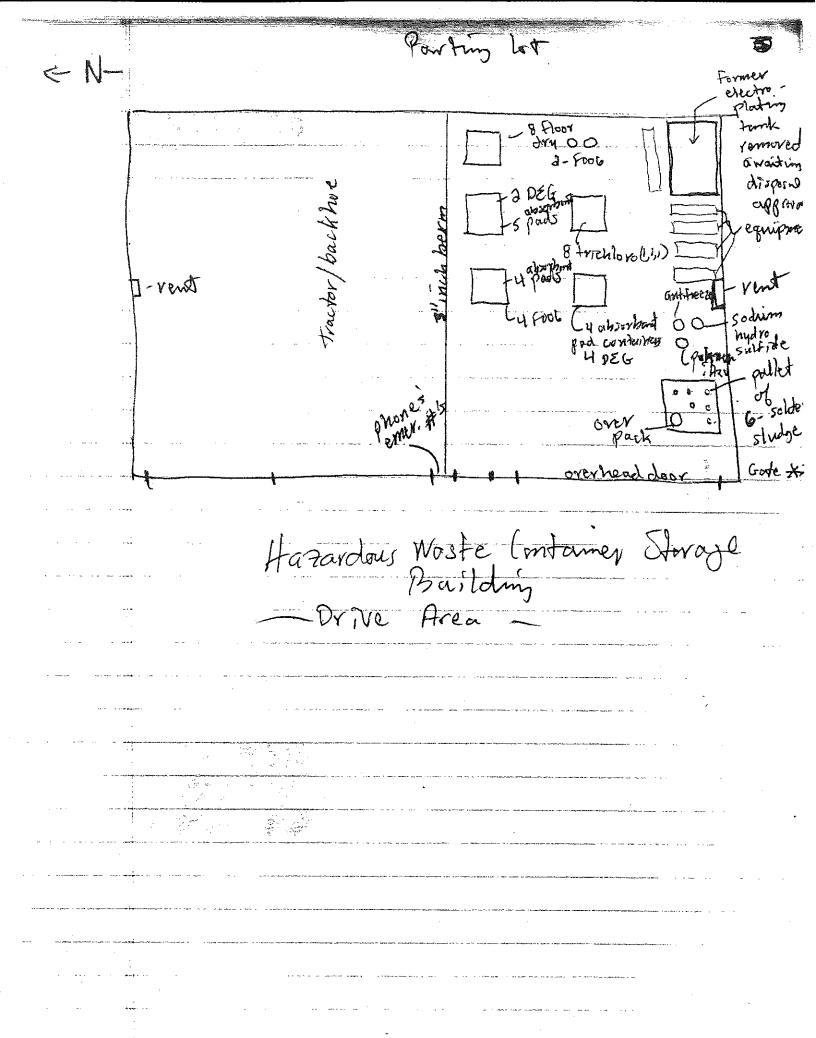
		•	OK	DP	NI	NA
4)	sup Haza	hazardous waste shipments to Indiana facilities hazardous waste shipments to states that do not ply manifests) has the generator used the Indiana ardous Waste Manifest?  IAC 3-8-2	1	**************************************		
5)	days appl wast	the generator submitted copies of hazardous waste ifests to the Department within five (5) working after shipping hazardous waste? (This requirementies to both Indiana's and other states hazardous te manifests).  IMC 3-8-4	Ċ.		<u> </u>	· · · · · · · · · · · · · · · · · · ·
6)	Repo	ortable exceptions: CFR 262.42 (329 IAC 3-10-3) (HWIMS 180)				
	a.	For manifests examined in (2) (except for shipmen days), enter the number of manifests for which the received a signed copy from the designated facilithe date of shipment.				
	b.	For manifests indicated in (%a), enter the number generator has submitted exception reports (40 CFR (329 IAC 3-10-3) to the Regional Administrator.	200	which	the	THE STATE OF THE S
Mau	aifes.	t # INA 0457011 dated 7/5/90 s	_/	) [	•	
де	sign	ated facility but lacked date	1900	200	ð -	
מפידע	NB TTO	VAL SHIPMENTS: (HWTMS 190)				
)	Has twaste	the installation imported or exported hazardous  PR 262.50 (329 IAC 3-11-1)	<u>O</u> K	DF	<u>NI</u>	NA V
	(If a	answered Yes, complete the following as applicable	.)			no
	a.	Exporting hazardous waste; has a generator:		•		
		i. Notified the administrator in writing?				
		ii. Obtained the signature of the foreign consignee confirming delivery of the waste(s) in the foreign country?				
		iii. Met the Manifest requirements?			-	-
	b.	Importing hazardous waste; has the generator met manifest requirements?	the	·whate		· ·

#### RECORDKEEPING AND REPORTING:

		<u>OK</u>	DF	NI	NA
1)	Has the generator made a proper hazardous waste determination for all solid wastes generated at the facility?		*		
	40 CFR 262.11 (329 IAC 3-7-2) (HWIMS 100)	***************************************	<u></u>		<del></del>
2)	Has the generator submitted biennial reports and exception reports as required?	1/			
	329 IAC 3-10-2 and 329 IAC 3-10-3 (HWIMS 180/36)	٠)			
3)	Are all test results and analyses needed for hazardous waste determinations retained for at least three years?	l/			
	40 CFR 262.40 (329 IAC 3-10-1) (HWIMS 180)				
* ]	Did not recognize DOO8 in DOOI wastestream				
	J			·	<del></del>
		W	<del></del>		

DRAW A SITE MAP; identify site of all hazardous waste activity, i.e. accumulation areas, storage areas, treatment areas, etc.

sel attacked



Project Johnson Ca Subject Goshan To Detail CRT/LDR S	ntrols Idiama Inspertan	Acct. No Comptd. By Ck'd. By	J.MYERS	Page Date	1)26)90
Detail	, T	Railre	Trock	Date	
		empty o	drum storage	*	
emph Storage Storage	FOC Y		- Final Storage		To beck of 200
orase area	Pac	of seperature for drawn instabled	- 3"berm		2
metal drum drum	+1	00	Bundahin	tardoms Wast	- Par
	facility Building (manufacturing storage)	- zoro gol above-ground waste oil tank	secontonal roste con	Hatardons Waste Accumulation	Parking Lot -
	ding storage)	1 tank	coment gad	waste oil that	

# Generator Accumulation Appendix (HWIMS 120)

	Location of Unit Haz. Waste Blog.					•
1)	If waste is being shipped off-site is it properly packaged, labeled and marked per DOT regulations? 40 CFR 262.30-262.32 (329 IAC 3-9-1 to 3)	<u>OK</u>	DF	<u>NI</u>	<u>NA</u>	
				- 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10		
2)	Is the container clearly marked with the start of accumulation date? 40 CFR 262.34 (329 IAC 3-9-5)		V			
3)	Have more than 90 days elapsed since the date inspected in (a)? 40 CFR 262.34 (329 IAC 3-9-5)	*		Manage Property Communication of the Communication		
4)	Do wastes remain in accumulation tanks for more than 90 days? 40 CFR 262.34 (329 IAC 3-9-5		e#####################################	##Malanana	V	
5)	Is each container and tank labeled or marked clearly with the words "Hazardous Waste"? 40 CFR 262.34 (329 IAC 3-9-5)	<u>\</u>	<del></del>	-		
¥3	druns lacked dates so their age couldn't be determined wi	theen	tainty	. All a	ther dr	ums were
L90 Curi	Odays old. Also 6-5 gal. buckets of soldering pot sludge. Not rently out for analysis by Great Lakes Environmental. All areda hazadous. Part of why it's been held is because they contain alot of sicould not find a way to extract the silver.					
	Satellite Accumulation (HWIMS 120)					
1)	Are containers marked with the words "Hazardous Waste or with other words identifying the contents? 40 CFR 262.34 (329 IAC 3-9-5 (c))	* <u>~</u>	-	<b></b>	******	
2)	Are containers in good condition, compatible with the wastes in them and stored closed?  40 CFR 262.34 (329 IAC 3-23-2 & 3 & 4(a))	<del></del>	<u> </u>			
		······································	<del></del>			· •
002: kaw 1/1:	<i>(</i> )	spent	abso	Pag	e t pads	( F402)

## Use and Management of Containers

Location of Unit Haz. Waste Bldge

(HWIMS 160/410)

	OK DE NI NA
1) Are containers in good condition?	V
2) Are containers compatible with waste in them?	<u></u>
3) Are containers managed to prevent leaks?	<u></u>
4) Are containers stored closed?	pg. /
5) Are ignitable and reactive wastes stored at least 15 meters (50 feet) from the property line? (Indicate if waste is ignitable or reactive).	./
6) Are incompatable wastes stored in separate containers? (If not the provisions of 265.17(b) apply)	
7) Are containers of incompatible waste separated or protected from each other by physical barriers or sufficient distance?	<u></u>
8) If required, are the following special requirements for ignitable, reactive, or incompatible wastes addressed?	
<ul><li>a. Special handling?</li><li>b. No Smoking signs?</li><li>c. Separation and protection from ignition sources?</li></ul>	<u></u>
9) Does the container storage area have adequate aisle space (about 2.5 feet)?	<u> </u>
10) Can containers be inspected for leaks or deterioration without moving the containers during the inspection?	
Preparedness and Prevention	
11) Security - Do security measures include: (HWIMS 300)	
<ul> <li>a. 24- hour surveillance? or</li> <li>b. Barrier around facility including controlled entry?</li> <li>c. Danger sign(s) at entrance?</li> </ul>	
12) Maintenace and Operation of Facility: (HWIMS 140/340,	\$10 spill)
a. Is there any evidence of fire, explosion, or release of hazardous waste or hazardous waste constituent?	(100)
	Page

13	) If required, does the facility have the following equipment: (HWIMS 140/340)	
		OK DE NI NA
	<ul> <li>Internal communications or alarm systems?</li> <li>Telephone or 2-way radios at the scene of operations?</li> <li>Portable fire extinguishers, fire control, spill control equipment and decontamination equipment?</li> <li>Are water hoses, foam equipment, automatic spinklers</li> </ul>	
	or water spray equipment available? (Please specify)	$\checkmark$
14)	Whenever waste is being handled do all personnel have immediate access to an alarm or communication device (thru another employee if always available)?  (HWIMS 140/340)	
	Testing and Maintenance of Emergency Equipment	
	(HWIMS 140/340)	÷
15)	<ul> <li>a. Has the owner or operator established testing and maintenace procedures for emergency equipment?</li> <li>b. Is emergency equipment in operable condition?</li> </ul>	
16)	Does the owner or operator maintain adequate aisle space for the movement of personnel, fire protection equipment, spill control equipment, and decontamination equipment? (This applies to access for this equipment to reach hazardous waste management areas)	
	*TSD's Only check for comments on back!	
	The second secon	

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# Use and Management of Containers

```
Are containers in good condition?
                                             40 CFR 265.170 (329 IAC 3-23-1)
  2)
      Are containers compatible with waste?
                                             40 CFR 265.172 (329 IAC 3-23-3)
  3)
      Containers managed to prevent leaks?
                                             40 CFR 265.173(b) (329 IAC 3-23-4)
  4)
      Are containers stored closed?
                                             40 CFR 265.173(d) (329 IAC 3-23-4)
      Are ignitable and reactive wastes stored at least 15
  5)
      meters (50 feet) from the property line? (Indicate if
     waste is ignitable or reactive).
                                             40 CFR 265.176 (329 IAC 3-23-6)
  6) Are incompatable wastes stored in separate containers?
      (If not provisions of 265.17(b) apply) 40 CFR 265.177(a) (329 IAC 3-23-7)
     Are containers of incompatible waste separated or
     protected from each other by physical barriers or
     sufficient distance?
                                             40 CFR 265.177(c) (329 IAC 3-23-7)
     If required, are the following special requirements for
 8)
     ignitable, reactive, or incompatible wastes addressed?
          Special handling?
     b.
          No Smoking signs?
          Separation and protection from ignition sources?
                                             40 CFR 265.17(a) (329 IAC 3-16-8)
 9) Does the container storage area have adequate aisle space
     (about 2.5 feet)?
                                             [329 IAC 3-23-4 (c)]
 10) Can containers be inspected for leaks or deterioration
     without moving the containers
                                             [329 IAC 3-23-4 (c)]
 11) *Security-Do security measures include:
          24- hour surveillance? or
          Barrier around facility including controlled entry?
     b.
          Danger sign(s) at entrance?
                                             40 CFR 265.14 (329 IAC 3-16-5)
 12) Maintenace and Operation of Facility
          Is there any evidence of fire, explosion, or release
          of hazardous waste constituent?
                                             40 CFR 265.31 (329 IAC 3-17-2)
 13) If required, does the facility have the following equipment:
          Internal communications or alarm systems?
                    40 CFR 265.32 (a) & 40 CFR 265.34 (a) (329 IAC 3-17-3 & 5)
          Telephone or 2-way radios at the scene of operations?
    Ь.
                    40 CFR 265.32 (b) & 40 CFR 265.34 (b) (329 IAC 3-17-3 & 5)
         Portable fire extinguishers, fire control, spill
         control equipment and decontamination equipment? Are
         water hoses, foam equipment, automatic spinklers or
         water spray equipment available? 40 CFR 265.32(c)[329 IAC 3-17-3(c)]
14) Whenever waste is being handled do all personnel
    have immediate access to an alarm or communication
    device (thru another employee if always available)?
                                             40 CFR 265.34(a)[329 IAC 3-17-5]
15) a.
         Has the owner or operator established testing and
         maintenace procedures for emergency equipment?
                                             40 CFR 265.33 [329 IAC 3-17-4]
    Ь.
         Is emergency equipment in operable condition?
                                             40 CFR 265.33 [329 IAC 3-17-4]
16) Does the owner or operator maintain adequate aisle space for the movement
    of personnel, fire protection equipment, spill control equipment, and
    decontamination equipment? (This applies to access for this equipment to
    reach hazardous waste management areas) 40 CFR 265.35 [329 IAC 3-17-6]
    *TSD's Only
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50175 1/13/89

# RCRA LAND DISPOSAL RESTRICTIONS INSPECTION

I. General Information	n				
Facility:		Johnson Co			
U.S. EPA ID No.:		IND oug 5	49 593		
Street:		302 E. Mo			
City:	(	boshen	Sta	te: <u>IN</u> Zij	: 46526
Telephone:	_2	.19 - 533-21	<u> </u>		
Inspection Date: Weather Conditions:	<del>_</del>	26/90 Time overczst, 6	: 10:30 (		
	Na	me	Agency/Title	<u>Tel</u>	ephone
Inspectors:			U.S. EPA	(708)	228-0900
	J	in Myers	U,S. EPA	(317) 5	45-1073
Facility Representative	es: <u>L</u>	e Heck, Man	facturing Eng	r. (219)5.	33-2111
See Appendix B to det	termine whi	ch of the followin	g LDR waste ca	itegories the fa	cility manages:
	Generate	Transport	<u>Treat</u>	Store	<u>Dispose</u>
F001-F005 Solvents			· · · · · · · · · · · · · · · · · · ·		
F020-F023 and F026-F028			·		————————————————————————————————————
California List*	<u></u>	<u></u>			
First Third [40 CFR 268.10]					
Second Third [40 CFR 268.11]			<del> </del>	· 	
Third Third [40 CFR 268.12]			Address	·	

<sup>\*</sup> See Appendix A

# RCRA LAND DISPOSAL RESTRICTIONS INSPECTION

## II. WASTE IDENTIFICATION

1.	F001 through F005 spent solvents: F001, F002, F003, F005						
2.	F020-F023 and F026-F028 dioxin-containing wastes:						
3.	California List Wastes (See Appendix A): Cal list wastes not recognized by fallead + HOCs in Dool wastestream; cyanide in Dool wastestream. HOCs and cyan						
4.	First Third Wastes [40 CFR 268.10]: FOOL (WWTP sludge from electropizing)						
5.	Second Third Wastes [40 CFR 268.11]:						
6.	Third Third Wastes [40 CFR 268.12]**:						
chara the t	DOOI, Doo2  are the only issues of current concern as lead is now covered under the treatment for DOOB.  te: Effective 09/25/90, large quantity generators and TSDs are required to use the toxicity cteristic leaching procedure (TCLP) instead of the extraction procedure (EP) for determining oxicity characteristic (TC). Small quantity generators must comply with this new requirement /29/91. Wastes which exhibit TC, but do not exhibit EP, will be considered "newly identified" s. They will be regulated under 40 CFR Part 268 only after they are evaluated by U.S. EPA, it is the regulated to the constituent previously covered under the EP toxicity.						
chara the t by 03 waste even chara	cteristic leaching procedure (TCLP) instead of the extraction procedure (EP) for determining						
chara the t by 03 waste even chara	teristic leaching procedure (TCLP) instead of the extraction procedure (EP) for determining obtaining contents to the content of the content						
chara- the t by 03 waste even chara	teristic leaching procedure (TCLP) instead of the extraction procedure (EP) for determining exicity characteristic (TC). Small quantity generators must comply with this new requirement (729/91. Wastes which exhibit TC, but do not exhibit EP, will be considered "newly identified" so. They will be regulated under 40 CFR Part 268 only after they are evaluated by U.S. EPA, if they are characteristic for a constituent previously covered under the EP toxicity exteristic (55 FR 22531).  The Code Determination  Have all wastes been correctly identified for purposes of compliance with						
chara- the t by 03 waste even chara	teristic leaching procedure (TCLP) instead of the extraction procedure (EP) for determining oxicity characteristic (TC). Small quantity generators must comply with this new requirement (729/91. Wastes which exhibit TC, but do not exhibit EP, will be considered "newly identified" s. They will be regulated under 40 CFR Part 268 only after they are evaluated by U.S. EPA, if they are characteristic for a constituent previously covered under the EP toxicity cteristic (55 FR 22531).  The Code Determination  Have all wastes been correctly identified for purposes of compliance with 40 CFR Part 268?*						
chara- the t by 03 waste even chara	teristic leaching procedure (TCLP) instead of the extraction procedure (EP) for determining exicity characteristic (TC). Small quantity generators must comply with this new requirement (729/91. Wastes which exhibit TC, but do not exhibit EP, will be considered "newly identified" s. They will be regulated under 40 CFR Part 268 only after they are evaluated by U.S. EPA, if they are characteristic for a constituent previously covered under the EP toxicity exteristic (55 FR 22531).  The code Determination  Have all wastes been correctly identified for purposes of compliance with 40 CFR Part 268?*  Yes No						
chara- the t by 03 waste even chara	cteristic leaching procedure (TCLP) instead of the extraction procedure (EP) for determining exicity characteristic (TC). Small quantity generators must comply with this new requirement (729/91. Wastes which exhibit TC, but do not exhibit EP, will be considered "newly identified" s. They will be regulated under 40 CFR Part 268 only after they are evaluated by U.S. EPA, if they are characteristic for a constituent previously covered under the EP toxicity cteristic (55 FR 22531).  The Code Determination  Have all wastes been correctly identified for purposes of compliance with 40 CFR Part 268?*  Yes No  If no, list below:  Assigned Classification						

6.	Third Third	Soil and debris contaminated with wastes that had treatment standards set in the Third Third rule based on incineration, mercury retorting, or vitrification. See Appendix A; (expires - 05/08/92). [40 CFR 268.35(c)]						
	Yes	No <u>/</u>	List					
7.	P012, P036, 268.35(c)]	P038, P065, P0	ers - F039, K031, K084, K101, K102, K106, P010, P011, 87, P092, U136, U151. (expires -05/08/92). [40 CFR					
	Yes	No <u></u>	List					
8.	(nonwastew	/aters), D008 (le	fied as hazardous based on a characteristic alone: D004 ead materials stored before secondary smelting), D009 - 05/08/92). [40 CFR 268.35(c)]					
	Yes	No <u>✓</u>	List					
9.	Inorganic so bricks carry CFR 268.35	ing EPA Hazar	fined in 40 CFR 268.2(g)*; includes chromium refactory dous Waste Nos. K048-K052 (expires - 05/08/92). [40					
	Yes	No 🗸	List					
	*Note: Inco	rrect reference	[40 CFR 268.2(a)(7)] in Third Third rule.					
10.	(expires - 0	5/08/92). [40 C						
	Yes	No 🗸	List					
11.	Wastes list	ed in 40 CFR 26	58.10, 268.11, and 268.12 that are mixed tes (expires - 05/08/92)*. [40 CFR 268.35(d)]					
	Yes	No <u>√</u>	List					
			8.11 wastes incorrectly omitted from this variance in the Third					

Johnson Controls helds Interim status however their waste management practices involve no treatment (subject to RCRA), disposal and only (40 day storagl. They receive now aste from off-site.

## RCRA LAND DISPOSAL RESTRICTION INSPECTION

#### IV. TSD REQUIREMENTS

A.

Waste .	Analysis	[40 CFR	268.7(b)	), 264.13, a	nd 265.1	3]			
1.				<u>an</u> address 265.13(b)(		owing LDI	R waste categ	ories?	
	F001-F0	005 Spent	Solvents		*	Yes	. No	N	IA.
	F020-F0	023 and F	026-F028	3 Dioxins	*	Yes	No _	_ N	IA
	Californ	nia List W	astes	*		Yes	. No _	N	IA
	First, Se	econd, an	d Third T	hird Waste	es 🗶	Yes	. No _	N	IA
	Comme	ents <u>* No</u>	he was	available.	e at t	Lesite	during th	e inspect	704.
2.							39 multi-sour		
	Yes		lo	NA_	$\checkmark$				
3.	What d	ate was th	ne waste a	analysis pla	n last re	vised?		* see L	omment above
4.	Does analytical data contain all the information required to treat, store, or dispose of restricted wastes? [40 CFR 264.13(a)(1) and 265.13(a)(1)] Data appears to be available but is not always used appropriately by the facility, e.g.  Yes V No Doo! wastes containing flood perm Hols and 5500 perm Lead are not recognized as Cal List on Doos. Similarly, Doo? was liftyes, which of the following are sources of analytical data? (More than one may apply.):  Generator provides data  Facility performs analyses in on-site laboratory  Facility contracts analyses at off-site laboratory								
	If the generator provides data, does the facility provide corroborative testing? [40 CFR 264.13(a)(2) and 265.13(a)(2)]  Facility does not receive wastes  Yes No NA V From off site  If analyses are conducted off site, identify lab: Great Lates Environmental Services								
	a. Are wastes with treatment standards specified in 40 CFR 268.41 analyzed using the toxicity characteristic leaching procedure (TCLP)?* (BDAT** = stabilization/immobilization technology) [40 CFR 268.7(b)(1)]								
		Yes			NA _	<del></del>		•	
		*See Appe **BDAT =	endix C for best demo	r exceptions nstrated ava	i. Milable to	echnology.	See Appendix	A.	•

_		•	If yes, list the wastes for which TCLP was used and provide the date of last test, frequency of testing, and note any problems. Attach test results. [40 CFR 264.73 (b)(3) and 265.73(b)(3)]
		b.	Are wastes with treatment standards specified in 40 CFR 268.43 analyzed using total constituent analysis?* (BDAT = destruction/removal technology) [40 CFR 268.7(b)(3)]
			Yes No NA <u>\langle</u>
			*See Appendix C for exceptions.
			If yes, list the wastes for which total constituent analysis was used and provide the date of last test, frequency of testing, and note any problems. Attach test results. [40 CFR 264.73 (b)(3) and 265.73(b)(3)]
		c.	Is the paint filter liquids test (PFLT) used to determine if California List wastes are contained in <i>liquid</i> hazardous waste? [40 CFR 268.32(i)]
			Yes No NA
			If yes, list the wastes for which PELT was used and provide the date of last test, the frequency of testing, and note any problems. Attach test results. [40 CFR 264.73(b)(3) and 265.73(b)(3)]
B.	Opera	ating Rec	cord [40 CFR 264.73 and 265.73]
	1.	Does t specific 265.73	he operating record contain records and results of waste analyses performed as ed in 40 CFR 268.4 and/or 40 CFR 268.7(b)? [40 CFR 264.73(b)(3) and (b)(3)]
		Yes _	No <u></u>
	2.	Does the [40 CF	he operating record contain copies of LDR notifications and certifications?*  R 264.73(b)(11), (13), and (15) and 40 CFR 265.73(b)(11), (13), and (15)]
		Yes <u>∨</u>	
		*Include	e both those received from generators, and those prepared for off-site shipments.
	3,	which a	the operating record include appropriate documentation for restricted wastes are managed wholly on site? [40 CFR 264.73(b)(12), (14), and (16) and (b)(12), (14), and (16)]
		Yes _	

		Does the documentation discussed in points 2. and 3. reflect proper historical management of wastes previously covered under expired national capacity variance case by case extensions, and the soft hammer provision?*								
		Yes $\sqrt{}$	No	NA						
٠		treatment star	e soft hammer pr ndards establish city variance to	rovision expired as o <u>f 05/08/90.</u> Soft hammer wastes which had led in the Third Third rule were granted a minimum 90-day 08/08/90.						
C.	Stora	ge [40 CFR 26	8.50]							
	1.	Are prohibit	ed* wastes sto	red on site in containers?						
		Yes <u>√</u>	No	(If No, go to 2.)						
		*See Appendix	E for distincti	ion between restricted and prohibited wastes.						
		Are all contacts storage? [40]	ainers clearly n CFR 268.50(a	narked to identify the contents and date(s) entering  (2)(i)] Facility accumulates wastes for <90 day only						
		Yes								
		Have wastes regulations	s been stored fo went into effec	or more than one year since the applicable LDR						
		Yes	No	(If No, go to 2.) With absolute certainty.						
		Can the faci	ility show that s	such accumulation is necessary to facilitate property posal? [40 CFR 268.50 (c)]						
		Yes	No 🗸							
		If yes, state	how:							
	2.	Are prohibi	ted wastes stor	ed on site in tanks?						
		Yes	No <u>√</u>	(If No, go to 3.)						
		hazardous v	vaste received, recorded and	ed with a description of the contents, the quantity of each and date each period of accumulation begins, or is such maintained in the operating record? [40 CFR						
		Yes	No							
		Have tanks went into e		at least once per year since the applicable LDR regulations						
		Ves	No	(If Yes, go to 3.)						

		recovery, trea	atment, or disp	osal? [40 (	CFR 268.50(c	esary to facil	itate proper
		Yes	No			<del>-</del> .	
		If yes, state he	ow:			<u> </u>	
	3.	Does the faci greater than o	lity store liquid or equal to 50 p	hazardou pm?	s waste conta	ining PCBs a	t concentrations
		Yes	No <u>√</u>	(If No,	go to D.)		
		Does the facil	lity meet the T	SCA crite	ria in 40 CFR	761.65(b)? [	[40 CFR 268.50(f)]
		Yes	No				
	-	Have these w	astes been stor	ed for mo	re than one ye	ear? [40 CFR	268.50(f)]
		Yes	No				
).	Trea	tment					•
	1.	Does the facil	ity treat restric	ted waste	s other than in	surface imp	oundments?
		Yes 🛨	No <u>√</u>	(If No,	do not compl	ete this section	on. Go to E.)
	2.	Are required specified in 40	technologies us CFR 268.42?	sed to trea [40 CFR	it wastes which 268.40(b)]	h have treatn	nent standards
		Yes	No	NA	(If Y	es or NA, go	to 3.)
	٠.	Was an altern	ative method a	pproved?			
		Yes	No				
		List each wast method. Chec 268.42(b)]	e code, the teck	hnology s of the alter	pecified in 40 mative metho	CFR 268.42, d is documen	and the alternative ted. [40 CFR
		Waste Code	Required Tec		Alternative	Method	Approval
	3.	from lab packs	containing DC with the subpa	104, D005,	.D006, D007,	D008, D010.	cinerator residues and D011 treated naracteristic wastes?
		Yes	No	NA			

D	escribe all o	her waste codes and treatment processes:	
<u> </u>	Vaste Code	Treatment Processes	
C	Characteristic	wastes:	
	s the 40 CFR haracteristic	Part 268 treatment standard lower than the 40 CFR Part 261 level?*	
Y	es	No	
ar cl	This applies t nd 268.43, and haracteristic	o both concentration based treatment standards specified in 40 CFR 268. I to some 40 CFR 268.42 required methods which result in treatment below level. See Appendix D.	41 the
· ti	f yes, does the reatment star CFR 268.9(d)	e facility manage the waste as restricted until 40 CFR Part 268 and ards are met, even after the waste is rendered non-hazardous? [4]	40
7	Yes	No	
(	Comments		
	- *	nibition [40 CFR 268.3]:	
а	a. Does	the facility mix prohibited wastes with different treatment standard	is?
	Yes_	No (If No, go to c.)	
	List t	he wastes	
ŧ		he wastes amenable to the same type of treatment? [55 FR 22666]	
	Yes_	No	
	If yes	, is this method used for the aggregated wastes?	
	Yes	No	
	Com	ments	
•	c. Base is dil	d on an assessment of points a. and b., or any other relevant informution used as a substitute for treatment? [40 CFR 268.3(a)]	ı <b>at</b> ioı
	Yes	No	
	Com	ments	

Yes	No
Comments	
Does the facil hazardous to	lity ship any characteristic wastes which have been rendered non- a Subtitle D facility?
Yes	No (If No, go to 9.)
Complete the	following table:
Waste Code	Receiving Facility
<del> </del>	
Are a notifica Administrator	tion and a certification for each shipment sent to the Regional or authorized State? [40 CFR 268.9(d)(1) and 268.7(b)(5)]
Yes	No
Does the facil facilifacility?	ity ship any wastes or treatment residues to an off-site land disposal
Yes	No (If No, go to 10.)
Complete the	following table:
Waste Code	Receiving Facility
· .	
<del></del>	
	tion and a certification provided to the land disposal facility with each at? [40 CFR 268.7(b)(4) and 40 CFR 268.7(b)(5)]
Yes	No
	ity ship any wastes or treatment residues to be further managed at a ment or storage facility?

		Complete the following table:
		Waste Code Receiving Facility
		Are appropriate generator notifications and certifications provided to the receiving facility with each waste shipment? [40 CFR 268.7(b)(6)]
		Yes No
E.	Surfa	ace Impoundments [40 CFR 268.4]
	1.	Are restricted wastes placed in surface impoundments for treatment?
		Yes No $$ (If No, go to F.)
		List
	2.	Are evaporation or dilution the only recognizable treatment occurring in the surface impoundment? [40 CFR 268.3(a) and 268.4(b)]
		Yes No
		Comments
	3.	Has the facility submitted to the Agency a waste analysis plan and certification of compliance with minimum technology requirements and ground-water monitoring requirements? [40 CFR 268.4(a)(4)]
		Yes No
	4.	If the minimum technology requirements have not been met, has a waiver been granted for that unit? [40 CFR 268.4(a)(3)(ii)]
		Yes No NA
	5.	Are representative samples of sludge and supernatant from the surface impoundment tested separately, acceptably, and in accordance with the sampling frequency and analyses specified in the waste analysis plan? (Attach test results.) [40 CFR 268.4(a)(2)(i)]
		Yes No
	6.	Does the operating record adequately document the results of waste analyses performed in accordance with 40 CFR 268.4? [40 CFR 264.73(b)(3) and 265.73(b)(3)]
		Yes No
		Comments

	7.	Do the treatment residues (sludges or liquids) exceed applicable treatment standards/prohibition levels?
•	-	Sludge Yes No Waste Code Supernatant Yes No Waste Code
		Provide the frequency of analyses conducted on treatment residues:
÷	8.	If sludge residues exceed treatment standards/prohibition levels, are they removed on an annual basis? [40 CFR 268.4(a)(2)(ii)]
		Yes No NA
		Comments
		Are residues subsequently managed in another surface impoundment? [40 CFR 268.4(a)(2)(iii)]
		Yes No
	9.	If supernatant is determined to exceed treatment standards, is annual throughput greater than impoundment volume? [40 CFR 268.4(a)(2)(ii)]
-		Yes No NA
		Comments
F.	Land	Disposal
÷	1.	Are restricted wastes placed in or on the land in units such as landfills, surface impoundments*, waste piles, land treatment units, salt domes/beds, mines/caves, concrete vaults, or bunkers? [40 CFR 268.2(c)]
	• .	Yes No $\sqrt{}$ (If No, go to G.)
		*Note: Do not include surface impoundments addressed in E.
		If yes, specify which units and what wastes each unit has received:
	•	<u>Unit</u> <u>Waste</u>
-		
	2.	Does the facility, in accordance with an acceptable waste analysis plan, test prohibited wastes prior to land disposal to ensure that all applicable treatment standards and/or prohibition levels have been met? [40 CFR 268.7(c)(2)]
		Ycs No
		Comments

Yes	No	NA	
*Note: A		a characteristic lev	el only if the treatment standard for
Does the performe 265.73(b	ed in accordance	d adequately docur with 40 CFR 268.7	nent the results of waste analyses (c)? [40 CFR 264.73(b)(3) and
Yes	No		_
If yes, at	what frequency	are analyses perfor	med?
Does the	e facility land disp	oose of restricted w	astes which are not prohibited?
Yes	No	(If No, go to	6.)
List was	te codes in appro	priate category bel	ow:
Case-By	-Case Extension	(40 CFR 268.5)	68, Subpart C)
copy of restricte	the generator no	tification [40 CFR o a case-by case ex	of the quantities, date of placement, and a 268.7(a)(3)] for each shipment of tension or no-migration petition? [40]
Yes	No	NA	
Do land case-by-	disposal units recase extension n	ceiving wastes coveret the requirement	ered by a national capacity variance or here in 40 CFR 268.5(h)(2)?
Yes	No	NA	
If the fa	cility has a case- to the Regional	by-case extension, i Administrator?	s progress being made as described in
Yes	No	NA	
Are res	tricted wastes pla	aced in undergroun	d injection wells?

Othe	Wastestreams		
1.	Does the facility generate wast treatment units?	es other than residues from Re	CRA
	Yes <u>\langle</u> No	(If No, go to H.)	
2.	On-Site Management		
	Water Act, have the for restriction, how restrict	are treated in systems regulate flowing been documented: the ed wastes are managed, and w permit are not prohibited (if	e determination of hy wastes discharged
	Yes No	NA 🗸	
	non-hazardous, are the treatment standards are	are treated in RCRA exempt wastes managed as restricted met?* [40 CFR 268.9(d)]	
	268.41 and 268.43, and to	NA scentration based treatment stand some 40 CFR 268.42 required met scteristic level. See Appendix D	hods which result in
3.	Off-Site Management: Waste	Exceeds Treatment Standards	
	Are wastes that exceed treatmenational capacity variance) ship		
-	Yes V No	(If No, go to 4.)	
	Identify wastes code(s) and off-shipped.	site treatment or storage facil	ities to which wastes are
(Floor)	Fool Petroclem Processing Foo2 Petrochem Process		ectrodom/rocessing fuel blending
	Are LDR notifications provide facility? [40 CFR 268.7(a)(1)]	d for each shipment to the tre	atment or storage
		(If No, go to 4.)	

G.

	If alter	rnative treatment star ed in 40 CFR 268.7(a	ndards are specified ( 1)(7) or (8) included	with the notification?	
	Yes _	No	NA <u>√</u>		
4.	Off-Si	te Management: Wa	stes Meets Treatmer	nt Standards	
	a.	Are wastes that med off-site disposal fac		ds/prohibition levels shipped to an	
		Yes No	<u>√</u> (If No, g	go to 5.)	
		Identify waste code	(s) and off-site dispo	osal facilities:	
		Waste Code	Receiving Facili	<u>ty</u>	
		<del>-</del>			
				as provided for each shipment to the i) and 268.7(a)(2)(ii)]?	
	•	Yes No	(If No, g	go to b.)	
	b.	Are characteristic v RCRA exempt uni	wastes which have be t) shipped to a Subti	een rendered non-hazardous (in a tle D facility?	
		Yes No	NA	(If No or NA, go to 5.)	
		Complete the follo	wing table:		
		Waste Code	Receiving Facil	<u>ity</u>	
		Are a notification a Administrator or a	and a certification fouthorized State? [40]	or each shipment sent to the Regional CFR 268.9(d)(1) amd 268.7(b)(5)?	
		Yes No	1		

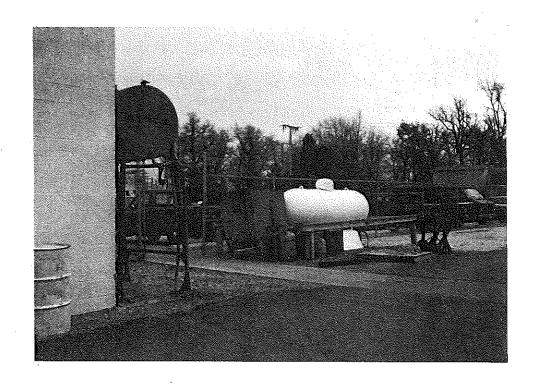
5.	Off-Si	te Management: Wastes Subject to Variances, Extensions, or Petitions
	<b>a.</b>	Are wastes that are subject to a national capacity variance (40 CFR Part 268, Subpart C) or a case-by-case extension (40 CFR 268.5) shipped to a treatment, storage, or disposal facility?
		Yes No (If No, go to 6.)
		Complete the following table:
		Waste Code Receiving Facility
	b.	Are LDR notifications (stating that the waste is not prohibited from land disposal) provided for each shipment to the off-site receiving facility? [40 CFR 268.7(a)(3)]
•		Yes No
6.	Dilutio	on Prohibition [40 CFR 268.3]:
	a.	Are prohibited* wastes with different treatment standards mixed?
	•	*See Appendix E for distinction between restricted and prohibited wastes.
		Yes No $\sqrt{}$ (If No, go to b.)
		List the wastes
		Are the wastes amenable to the same type of treatment? [55 FR 22666]
	-	Yes No
		Comments
	b.	Are prohibited wastes diluted to meet treatment standard criteria, or render them non-hazardous? [55 FR 22665-22666]
		Yes No (If No, go to c.)
· .		Check appropriate category:
		Dilutes to meet treatment standardsDilutes to render waste pon-hazardous

	CFR 268.3(b)]
	Managed in treatment systems regulated under the Clean Water Act Non-toxic* characteristic wastes
	Treatment standard specified in 40 CFR 268.41 or 268.43
	*Non-toxic = D001 (except high TOC nonwastewaters), D002, and D003 (except cyanno sulfides). [55 FR 22666]
	If the wastes do not fall into the above categories, briefly describe the conditions under which they were diluted.
c.	Based on an assessment of points a. and b., and any other relevant circumstances, are prohibited wastes diluted as a substitute for adequate treatment? [40 CFR 268.3(a)]
	Yes No <u>\lambda</u>
	Comments
Additional (	Comments, Concerns, or Issues Not Addressed in the Checklist:
Additional (	
Additional	
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Additional	

Photo No.: Facility: Location: Direction: Johnson Controls Goshen, Indiana Southeast G. Artrip Canon G III Kodak ISO 200 Nov. 26, 1990

Photographer:
Camera:
Film:
Date:
Time:

Nov. 26, 1990 P.M.



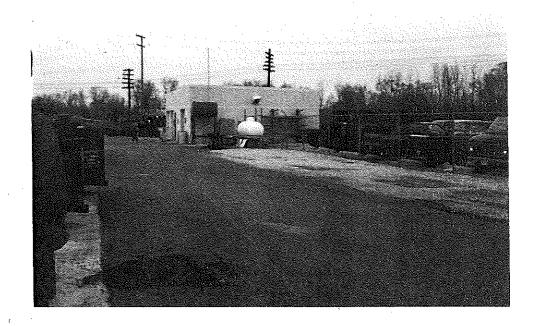
Tanks full of virgin materials adjacent to hazardous waste storage building.

Photo No.: Facility: Location:

Direction:
Photographer:
Camera:
Film:

Johnson Controls Goshen, Indiana North G. Artrip Canon G III Kodak ISO 200 Nov. 26, 1990 P.M.

Date: Time:



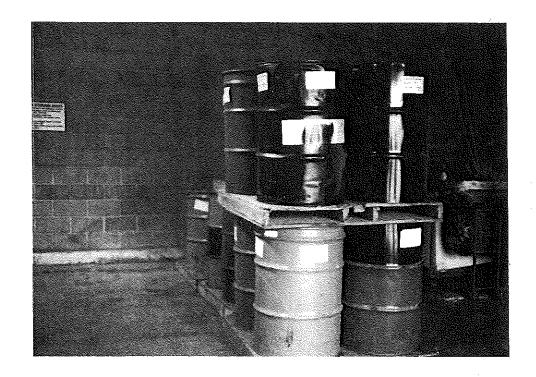
Hazardous waste storage building. Drums in the background are empty.

Photo No.: Facility: Location: Johnson Controls Goshen, Indiana NA

Direction:

Photographer: Camera: Film: Date: Time: G. Artrip Canon G III Kodak ISO 200 Nov. 26, 1990

P.M.



Typical drum storage arrangement in hazardous waste storage building.

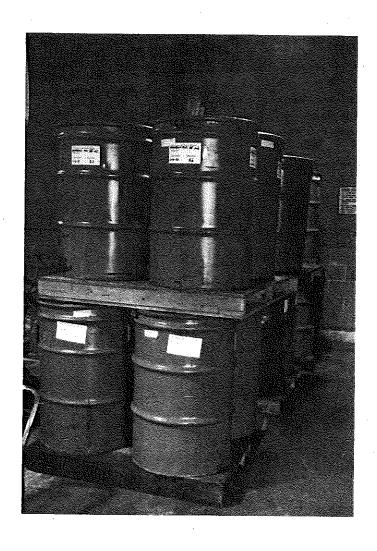


Photo No.:
Facility:
Location:
Direction:
Photographer:
Camera:
Film: Johnson Controls Goshen, Indiana NA G. Artrip Canon G III Kodak ISO 200 Nov. 26, 1990 P.M.

Date: Time:

Typical drum storage arrangement in hazardous waste storage building.

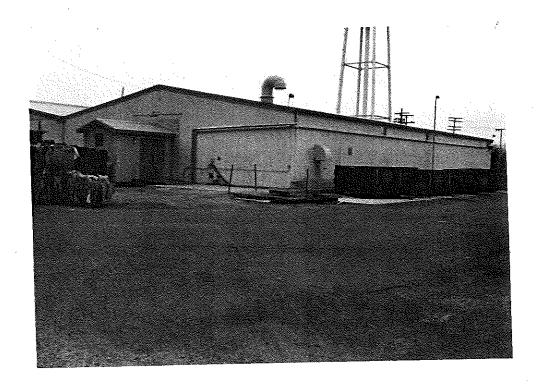
Photo No.: Facility: Location: Johnson Controls Goshen, Indiana

Direction: Photographer: Camera:

Northwest

G. Artrip Canon G III Kodak ISO 200 Film: Nov. 26, 1990 Date:

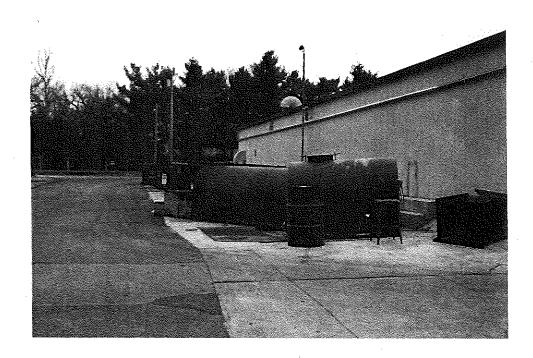
P.M. Time:



Rolloffs are used for metal scrap to be sent to foundry. Just to the left of rolloffs is the concrete pad where the 1500-gallon above-ground storage tank used to be located.

Photo No.: Facility: Location: Direction: Johnson Controls Goshen, Indiana South

Photographer: Camera: Film: Date: Time: G. Artrip Canon G III Kodak ISO 200 Nov. 26, 1990 P.M.



The two green (500- and 1000-gallon capacity) tanks which store waste oil.

Photo No.: Facility: Location: Direction: Johnson Controls Goshen, Indiana

NA

Photographer: Camera: Film: Date:

G. Artrip Canon GIII Kodak ISO 200 Nov. 26, 1990 P.M.

Time:

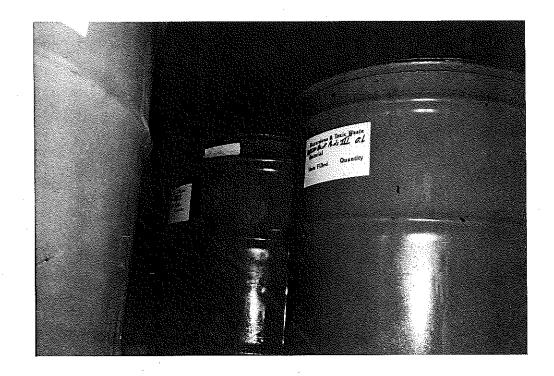


Photo shows drums of absorbent pads (F002) lacking dates of accumulation.

Photo No.: Facility: Location:

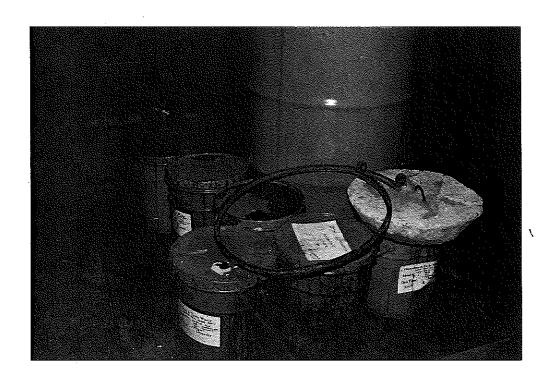
Johnson Controls Goshen, Indiana

Direction: Photographer: Camera:

NA G. Artrip Canon GIII

Film:
Date:
Time:

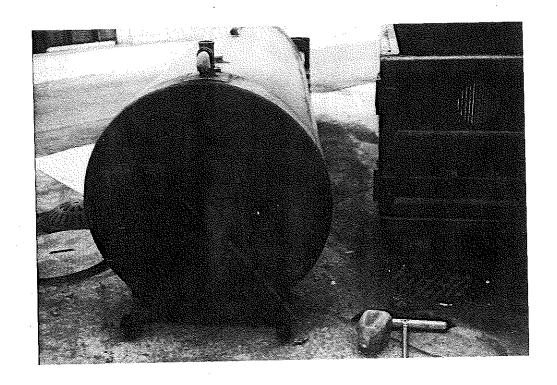
Kodak ISO 200 Nov. 26, 1990 P.M.



Silver solder drums in accumulation area.

Photo No.:
Facility:
Location:
Direction:
Photographer:
Camera:
Film:
Date:
Time:

Johnson Controls Goshen, Indiana SE G. Artrip Canon GIII Kodak ISO 200 Nov. 26, 1990 P.M.



100-gal. waste oil tank near storm drain.

10

Photo No.: Facility: Location: Johnson Controls Goshen, Indiana

Direction:
Photographer:
Camera:
Film: NA G. Artrip

Canon GIII

Kodak ISO 200 Nov. 26, 1990

Date: Time: P.M.



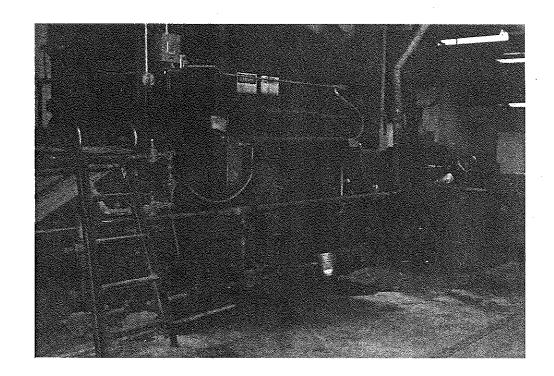
Drums of electroplating filter cake waste (F006) in satellite accumulation area. Note no dates or lids.

11

Photo No.: Facility: Location: Johnson Controls Goshen, Indiana NA

Direction:
Photographer:
Camera:
Film: G. Artrip

Canon GIII Kodak ISO 200 Nov. 26, 1990 P.M. Date: Time:



Vapor degreaser adjacent to distillation unit for trichloroethylene.

Photo No.: 12

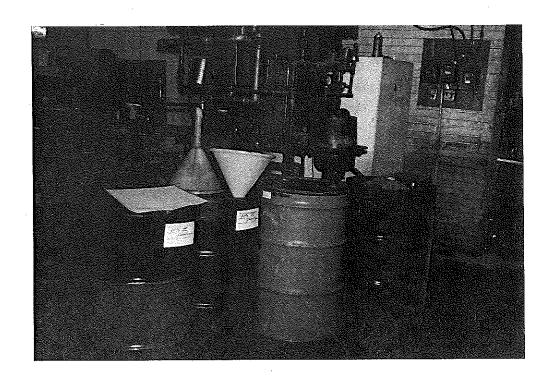
Facility: Location: Johnson Controls Goshen, Indiana

Direction: NA.

Photographer: Camera: Film:

G. Artrip Canon GIII Kodak ISO 200 Date: No. 26, 1990

Time: P.M.



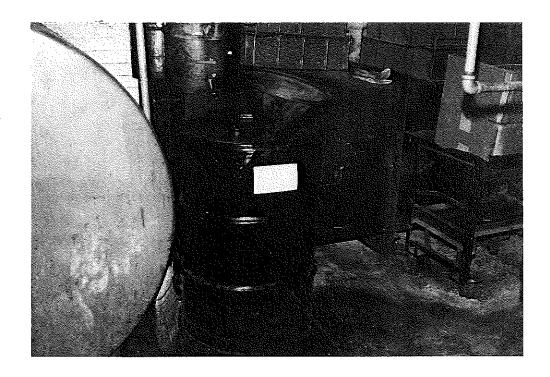
1,1,1-trichloroethane satellite accumulation area. Note funnels in drums, overfilled drums, excessive accumulation with no dates.

Photo No.: Facility: Location: Direction: 13 Johnson Controls Goshen, Indiana NA

Photographer: Camera:

G. Artrip Canon GIII Kodak ISO 200 Film: Date: Nov. 26, 1990

P.M. Time:



Trichloroethylene satellite accumulation area. Note funnel in drum and spillage on and around drum.

Johnson Controls, Inc. Control Products Division 1302 East Monroe Street Goshen, IN 46526-4297 Tel. 219/533-2111



. November 29, 1990

Gail Artrip 85 W. Algonquin Rd. Suite 500 Arlington Heights, IL 60005

#### ·Dear Gail:

Per your telephone call November 28, 1990, I have the information inclosed:

- 1. Map of Johnson Controls, Inc. with hazardous waste building marked.
- 2. Dow Chemical USA Methyl Chloroform, and the Montreal Protocol (update).
- 3. Johnson Controls, Inc. Waste Analysis Plan.
- 4. Manifest No. MI 2131017 dated 10/19/90 with Dichloronethane as explained in section J(b) of manifest with analytical results and approval for shipping.
- 5. Analysis of waste oil by Safety Kleen with material survey form.

The different numbers used for the F006, F007, and F008 are as follows:

- 1. F006 is used for our regular wastewater treatment sludge.
- 2. F007 spent cyanide plating bath solution from electroplating operations, one time clean-out of cyanide plating baths.
- 3. F008 plating bath residues from the bottom of plating baths from electroplating operations where cyanides are used in the process as per 40 CFR261.31.

SINCERELY,

JOHNSON CONTROLS, INC.

Emery Lee Heck

Manufacturing Engineer

ELH:mk eparespn

Enclosure 3

#### JOHNSON CONTROLS, INC. 1302 EAST MONROE STREET GOSHEN, IN 46526

Methods to be used at Johnson Controls, Inc. for sampling and analysis are referenced in 40 CFR 260.11. In general, a sampling plan should address these areas:

- I. Name of person sampling the waste and their relationship to your facility.
- II. A written description of the sampling method used to obtain a representative sample of the waste and the rationale for using this method. Use "Test Methods for Evaluating Solid Waste, Physical/Chemical Methods", Second Edition, July, 1982, SW-846 as a guide.
- III. Provide information regarding any Quality Assurance/Quality Control measures employed with the sampling method.

Specifically, each of the following details should be included in any sampling plan.

- 1) State the purpose or goal of the sampling program.
- 2) Give references such as maps or photographs of the sampling site(s) and state the dimensions of the area to be sampled.
- 3) Give information on the geology of the site, if applicable.
- 4) Give a brief description of the process generating the waste and the constituents of concern. Include any specifics and or background information concerning the waste material.
- 5) Specify what parameters will be tested for in the samples. Do not use general categories such as metals, organics, chlorinated solvents etc., but specify each parameter that will be tested for or each parameter that can be identified by the method used.
- 6) Are preliminary estimates of concentrations available? If these are available, they should be given.
- 7) Describe any field measurements to be taken or any testing to be done in the field.
- 8) Will statistical sampling strategies be used? Only in situations where the constituent approaches an action threshold limit, are statistical approaches necessary. Refer to SW-846 for information on statistical sampling.
- 9) Describe the type of sampling to be done (drummed waste, bag, can, tank, waste pile, lagoon, soil, well, etc.) and the physical state of the sample (aqueous, sludge, liquid, solid, etc.).

- 10) Will the samples be composited and if so, how will this be done? If the waste is distinctly multi-phased, compositing should not be used. Each phase should be sampled separately and contain a separate identification number. If the waste is homogeneous or stratified with no distinct phases, composite sampling may be advisable. Composite sampling of different wastes (e.g., different drums) should never be attempted.
- 11) Describe the numbers and volumes of samples to be taken. There are situations where taking a large number of samples may be justified even when the initial number of samples to be analyzed is expected to be small. Based upon the results of the initial number of samples analyzed, it could be determined if more samples are required for analysis. The time and cost savings of avoiding a second sampling program could more than offset the additional cost of supplies.
- 12) What equipment will be used for the sampling and how will it be decontaminated between samples?
- 13) What type(s) of containers will be used and how have these containers been prepared (cleaned)?
- 14) Will duplicate samples be collected and submitted for analysis? Will field blanks also be submitted for analysis?
- 15) How will the samples be preserved? Specify any preservatives to be added and how and when they will be added.
- 16) How will the chain of custody be maintained on the samples?
- 17) Assure that the sample holding time limits are not exceeded.
- 18) Give the method numbers of the analyses that the laboratory will perform and indicate which samples will be tested by each method number given. In the case of organics analysis, the laboratory should be able to list what compounds can be quantitated and provide expected detection limits.

## QA DATA REQUEST

The following information should accompany all analysis of solid waste submitted to the Division of Land Pollution Control. This information is needed to substantiate the validity of the analysis.

For all samples submit the information in A, B, and C.

A) Name, address, and telephone number of each laboratory providing analysis. Also include the name of the laboratory manager or contact person.

- B) Name of person sampling the waste and their relationship to your facility. A written description of the sampling method used to obtain a representative sample of the waste and the rationale for using this method. Provide information regarding any Quality Assurance/Quality Control measures employed with the sampling method. Use SW-846 as a guide.
- C) A description of the process generating the waste and the constituents of concern.

For the four characteristics, submit the information requested below. When a method number is requested it must, when necessary, come from SW-846 or a copy of the method must be provided.

- DODI-IGNITABILITY--Provide method number and laboratory QC information such as results of duplicates and standards used to determine the characteristic of ignitability for liquids. Provide narrative of method used, rationale for use, and explanation of findings for determination of characteristic of ignitability for solids.
- DOO2-CORROSIVITY--Provide method number and date and time of standardization of the instrument used to determine characteristic of corrosivity for liquids.

  Provide narrative or number of method used, rationale for use, and explanation of findings for determination of characteristic of corrosivity for solids.
- DOD3-REACTIVITY--Provide narrative or number of method used, rationale for use, explanation of findings, and appropriate QC data for determination of the characteristic of reactivity. Specify whether sample is solid or liquid and provide supporting analytical data. As a minimum, cyanide and sulfide analysis (totals) is required.
- DOO4-DO16 -EP Toxicity --Provide description of extractor used and a picture or accurate drawing of the extractor. An acceptable extractor is described in Method 1310 of SW-846, Second Edition, July 1982. Provide a complete description of the operating conditions and method employed. Provide a description of the filtering apparatus and the filters used. Report the initial pH, amount of acid added, solids content of original sample (80 degree C oven), volume of deionized water added for the extraction, and volume of final extract to be analyzed. Provide the method numbers of procedures used for sample preparation and analysis for metals. Provide all data pertaining to the use of the method of standard additions and any other QC measures employed to verify the precision and accuracy of results.
- TOTAL METALS--Provide the method numbers of procedures used for sample preparation and analysis for metals. Provide any QA/QC data necessary to verify the precision and accuracy of results.

CYANIDE -- Provide method number, QC measures and data used for analysis.

- SULFIDE--Provide method number, QC measures and data used for analysis.
- TOX--Provide method number and any laboratory QC measures used for analysis.
- ORGANICS--Provide method numbers for sample preparation and analysis and column used for analysis. Provide any QA/QC data necessary to verify the precision and accuracy of results, including surrogate recoveries, field blanks and duplicates and lab blanks and duplicates. Also indicate the method number for introducing volatile organic compounds into the GC. Provide the same information if GC/MS is used instead of GC.

OTHER--Any other analysis submitted should contain similar information.

REFERENCE: "Test Methods for Evaluating Solid Waste, Physical/Chemical Methods" SW-846, Second Edition, July 1982.

# MGAN DEPARTMENT

9 ej	DO	NOT Y	WRITE IN	THIS	SPACE	
ATT.		DIS	S. □	REJ.		PR. 🗆

Figured under authority of Act 64. P.A. 1978, as amended and Act 136. P.A. 1979. Failure to file is punishable under section 299.548 MCL or Section 10 of Act 136, P.A. 1969.

NATURE RESOURCES	_ AII. U	. <u>DIS. LT. N</u>	<u> </u>	Form App	roved OMB No.	2050-0039	Expires 9-30-9
A ZUNIFORM HAZARDOUS	[1. Generator's US EF	A ID No. M	anifest	2. Page 1	Informati	on in the s	haded areas by Federal
WASTE MANIFEST	T T N D Q Q 9	5 4 9 5 9 3 3 1	ment No. -  0 1 7	ol j	law.		
3 Generator's Name and Mailing Add JOHNSON CONTROLS	ress			4.4	Manifest Do		
1302 E. MONROE STREET		•		MI	<u>2131</u>	<del></del>	
GOSHEN, IN 46526 219-5	33-2111			B. State	Generator's इन्डिक्ट्स	υ	
4. Generator's Phone ( ) 5. Transporter 1 Company Name		US EPA ID Num	ber	- 13	Transporter'		
Great Lakes Environmental	Services IM	II DI OI 81 71 41 71 8					-758-040
7. Transporter 2 Company Name	8.	US EPA ID Num			Transporter'		
Solvent Distillers, Inc.		<u> </u>	4 0 8 8				-824-5840
9. Designated Facility Name and Site	Address 10.	US EPA ID Num	ber	G. State	Facility's IC	) <u></u>	***
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421 Lycaste			(독립)라 ELOLOLO	( :	ty's Phone		
Detroit, MI 148214	[A]	ID 9 8 0 6 1	12.Conta		313-824-		Waste
11. US DOT Description (including Prop	er Shipping Name, Ha IBFRI	izard Class, and		ı İ	Total	1	No. N
G HM ID NOW			No.	Туре	Quantity	VVV VOI	
X 1,1,1, TRICHLORG	ETHANE						
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DICHLOROMETHANE			200	DIM		rg. ∄	LO 10 12
ORM-A UN1593						- 8	141015
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a. Waste Alcohol /U109	0 1 2 2 2 2						10/ 7
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36 GENERATOR'S CERTIFICATION: I hereby de	eclare that the contents of t	his consignment are fully a	nd accurately	described	above by	2 2 -< -	
proper shipping name and are classified, pa	cked, marked, and labeled, a	and are in all respects in pr	oper conditio	n for transp	ort by highway		
at I cam a large quantity generator, I certify		Tara ta anduna the volume	and toxicity	of waste	generated to ti	ne degree l	nave determin
to be economically practicable and that I	have selected the practica	Re if I am a small quantity	generator.	have mad	rrently available a good faith	e to me with effort to m	inimize my wa
present and future threat to numan head	nanagement method that	is available to me and	that F can a	fford."	<u>.</u>	. F	Date
Printed/Typed Name		Signature		<u> </u>	7	М	onth Day
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1 .17. Transporter 1 Acknowledgement	of)Receipt of Materials	$\mathcal{I}$		- ,	7		. / Date
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119014 / N. (N.	95/	MINU		46	UIX_	<del>- /</del>	Date Date
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20. Facility Owner or Operator: Certific	cation of receipt of hazi	ardous materials cover	ed by this	mannest i	skept as no	rea III	Date
Printed/Typed Name		Signature		· · ·			Month Day
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great lakes environmental services, inc.

May 11, 1989

Mr. Lee Heck Johnson Controls 1302 E. Monroe Street Goshen, IN 46526

Dear Mr. Heck:

Great Lakes Environmental Services, Inc. is pleased to provide the following analytical results for the Waste Methylene Chloride received from ENSCO.

Sample #:	Tests:	Results:
LS89-87890	s.g. pH Btu/lb % Chloride Sulfide Viscosity Flashpoint OF Compatibility	1.04 7 2,021 2 774 ppm 8 >140 OK

Should you have any questions regarding these results, please feel free to contact your Environmental Services Coordinator.

Sincerely,

GREAT LAKES ENVIRONMENTAL SERVICES, INC.

Carol DeDeckere Customer Service

CD/bjh

c: Ken Rippe

- 20918 - R2271 (RUN 11/03/89)

PREQUALIFICATION EVALUATION CUSTOMER SURVEY



PAGE

COMPLETE: 11/03/89 CONTROL#: 0047263-4 SAMPLE# : 068343

ACCEPT

Enclosure #

FLUID RECOVERY

FLUID RECOVERY

NO ATTACHMENT

CUSTOMER INFORMATION:

JOHNSON CONTROLS 1302 E. MONROE ST. GOSHEN

IN 46526

ATTN: LOIS WANGLER

BRANCH: 508201 MARK ZIMMERMAN COUNTY: ELKHART .

NATURE OF BUSINESS: MFG OF CONTROLS

FEDERAL EPA ID: INDOO9549593 STATE EPA:

MANIFEST ADDRESS IS FACILITY MANIFEST TO SAFETY-KLEEN

MATERIAL: HYD. OIL/COOLANTS/WATER PROCESS: WASTE FROM MACHINE

VOLUME: 1500 GALS PER WEEK VOLUME ON HAND: 1500

SHIPPING FREQUENCY: 1 WK STORAGE CAPACITY: 2000 IN BULK IN BULK

COLOR: GREEN-REDDISH VISCOSITY: LAYERS: THREE PHYSICAL STATE: LIQUID

MATERIAL COMPOSITION(VOL%): CODE TYPICAL MIN MAX OIL, PETROLEUM COOLANT ۵ 0.0 10.0 C 0.0 10.0 WATER 0.0 80.0

RESTRICTED SUBSTANCES: NONE

D.D.T. HAZARDOUS MATERIAL: CUSTOMER REQUEST ASSISTANCE

EPA HAZARDOUS WASTE: CUSTOMER REQUEST ASSISTANCE

BRANCH: 508201 P.O. NO: DATE: 10/07/89

TYPE OF SAMPLE: TANK NUMBER OF DRUMS SAMPLED: TAKEN BY: SALESREP PHONE: 219-533-2111

TITLE: PRODUCTION SUPERVISOR CONTACT: LOIS WANGLER SVC IF OK

SURVEY COMMENTS: TURN OVER TO DIL EXT. 274

CORPORATE REVIEWS: DISPOSITION REVIEWER DATE

ACCEPT 11/01/89 HANDLING CODES: SO2/T50 TECHNICAL: PRICING CODE: F2 EJE

REGULATORY: ACCEPT CAP 11/01/89

OPERATING ACCEPT HWU 11/01/89

APPROVED FACILITIES: (654) SAFETY-KLEEN CORP (658) SAFETY-KLEEN CORP

633 EAST 138TH ST DOLTON IL 60419 STATE HWY 146

NEWCASTLE KY 40050

FED EPA#: ILD980613913 KYD053348108

STATE EPA#: 0310690006 TELEPHONE: 312/849-4850

502/845-2453

IL. AUTH#: 000162

APPROVED 0001053 DRUM OR BULK

DOT-EPA RO WASTE COMBUSTIBLE LIQUID N.O.S.

DESC. NA1993 (EPA FOO1)

COMMENTS: OK FOR HAZARDOUS WASTE WATER. FRS CAT II. NOT OK FOR

OIL SVCS. LAB FOUND III IN SAMPLE.

THIS SERVES AS NOTICE PER, 40CFR284.12(B), THAT THE FACILITY(IES) NOTED ABOVE HAS THE APPROPRIATE PERMITS AND IS WILLING TO RECEIVE THE MATERIAL DESCRIBED.

## SAFETY KLEEN CORP. PREQUALIFICATION EVALUATION MATERIAL ANALYSIS

PAGE 2 uf 3

COMPLETE: 11/03/89 CONTROL#: 0047263-4 SAMPLE# : 058343

ACCEPT

ELUID RECOVERY

ANSON CONTROLS

NO ATTACHMENT

ENERAL A				FLU	T D,	KE	CO	VER	: Y	* *			
	WALYSIS OF TOTA	AL SAMPL	E										
	COLOR	:	MULT	Ī							•		
	WATER CONTENT	:	7	6.3 WT%									
:	NON-VOLATILE	RESIDUE:	- 1	4.5 WT%	DESCR	IPTIC	on: c	11.					
	FLAMMABILITY FLAMMABILITY	:	NO FL	ASH AT 1	42 F	BY SE	ETAFL	ASH					
	FLAMMABILITY	:	NO	FLASH 1	02 F	BY SE	ETAFL	ASH					
	PH	:	ÐΙ	RECT B	Y METE								
	PH RADIOACTIVITY	:	NONE	DETECTED			-		-				
JEL EVAL	UATION OF TOTAL	L SAMPLE								***************************************			
	HEAT CONTENT:			2000 BTU	/LB			ASH	UPON	COMBUSTI	ION: (	O 1 WT%	
ey a	CHLORINE	С	L:	Q. 1 WT%				BROM	INE		BR: < (	O 1 WT%	
	FLUORINE	F	: <	0.1 WT%				SULF	UR		S: < (	O. 1 WT%	
jan i	COMMENTS: BOM	BED 85/1	5	•							• • • •	O. 1 W:/6	
ETALS CO	NTENT OF TOTAL	SAMPLE	(PPM):	DIGEST		BY: I	CP					7111	
В	BARIUM (DOO5) EAD (DOO8)	BA:	67	COPPE	R		CU:		9	IRON		FE:	69
L	(BOOD) DAE	PB:	36	COPPE	IUM		TI:		1	ZINC		711.	60
S	ILICON	SI:	100	ALUMI	NUM		Δ1 -		Ś	ROPON		214.	13
М	MAGNESIUM	MG:	11	SODIU	IM		NA ·		71	CALCII	IM.	O .	36
M	ANGANESE	MN:	2	PHOSE	HORUS		р.		22	STIVE	) (DO11	\ AC:	36
Δ	RSENIC (DOG4)	ΔS. <	1	REDVI	LTUM		RF.	_	4	CADMI	IN COOC	) AG: 1	1
Ĉ	HRDMIUM (DOOT)	CR <	4	MERCI	וסע (ח	( 200	HG:	2	;	DOTACE	TILLE	) CD; <	1
	OL VEDENIM	MO: <	4	NICKE	1	,005,	NIT :	-	•	ANITTM	DIUM DIUM	X : <	1
	ELENTUM (DOAO)	55. <	4	TIN	· <b>-</b>		CAL		,	ANIIM	JINT	SB: <	1
色绿i v	ANADTIM	3C: \	4	1 114			214:		1	IHALL.	LUM	TL: <	1
•	BARIUM (DOO5) EAD (DOO8) BILICON MAGNESIUM MAGNESE RESENIC (DOO4) MOLYBDENUM BELENIUM (DO10) MANADIUM	V ; \	l										
	OMPOSITION:					····				OFN		OSITION BY E APPEARAN (VOL%)	
*14576	JUMPUSZI ZUM.				CDECT	e		/T C 60 C	****	GEN	RAL COMPL	OSITION BY	: -
					SPECI	TTU	(0)	12005	EIT.	•	SENTRIFUGI	E APPEARAN	CE TOTA
eligencia i	101150110 011155				GRAVI	. 1 Y	(CE	NTIPU	JISE)		(VOL%)	( VOL% )	(WT %
	AQUEOUS PHASE ORGANIC PHASE BOTTOM SLUDGE	(FREE W	ATER).	• • • • • • • •							80.0	84.0	84.
	ORGANIC PHASE	(FEEDST	OCK)	,							20.0	16.0	16.
	BOTTOM SLUDGE	(SEMISO	LIDS).								0.0	0.0	0.
	BOTTOM SOLID	(SETTLED	SOLID	\$)							0.0	0.0	ο.
	TOTAL	*								-			
*	TOTAL				. 9	,,0	<	50	CPS		100.0	100.0	. 100.
PECIFIC	COMPOSITION OF	TOTAL S	AMPLE		<u></u>	•			COL	MDOSTTTO	V OF:	TOTAL	
									CO	WLOST ( TO	T UF;		
BARRY WAR C												SAMPLE	SAMPL
	WATER CONTENT											SAMPLE	SAMPL (WT%
	WATER CONTENT	DESTRIC		• • • • • • • • • • • • • • • • • • • •	DEECE	TOTIC	a a a a a					SAMPLE	SAMPL (WT% 76.3
	WATER CONTENT	RESIDUE			DESCR	 RIPTIO	 DN: 10	 )IL		· · · · · · · · · · · · · · · · · · ·		SAMPLE (WT%) 76.3	SAMPL (WT% 76.3 14.5
	WATER CONTENT NON-VOLATILE VOLATILE ORGA	RESIDUE NICS BY	DIFFER		DESCR	RIPTIO	 DN: 1	DIL		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	SAMPLE (WT%) 76.3	SAMPL (WT% 76.3
	VOLATILE ORGA	RESIDUE NICS BY	DIFFER	ENCE	DESCR	RIPTIO	ON: (	DIL			· · · · · · · · · · · · · · · · · · ·	SAMPLE (WT%) 76.3	SAMPL (WT% 76.8
	WATER CONTENT NON-VOLATILE VOLATILE ORGA	RESIDUE NICS BY	DIFFER	ENCE	DESCR	RIPTIO	 DN: (	DIL		· · · · · · · · · · · · · · · · · · ·	• • • • • • • • • • • • • • • • • • • •	SAMPLE (WT%) 76.3	SAMPL (WT% 76.8
	TOTAL	INICS BY	DIFFER	ENCE	• • • • • •				• • • •			SAMPLE (WT%) 76.3 14.5 9.2	SAMPL (WT% 76.3 14.5 9.2
DLATILE	TOTAL  ORGANIC COMPOS	INICS BY	DIFFER	IC PHASE					• • • •			SAMPLE (WT%) 76.3 14.5 9.2	SAMPL (WT% 76.3 14.5 9.2
DLATILE	TOTAL  ORGANIC COMPOS SAMPLE PREPAR	NICS BY  SITION OF RATION ME	OIFFER ORGAN	IC PHASE	BY GA				• • • •			SAMPLE (WT%) 76.3 14.5 9.2	SAMPL (WT9 76.3 14.5 9.2
DLATILE	TOTAL  ORGANIC COMPOS	NICS BY  SITION OF RATION ME	OIFFER ORGAN	IC PHASE	BY GA			TOGRAF	ЭНҮ			SAMPLE (WT%) 76.3 14.5 9.2	SAMPL (WT% 76.5 14.5 9.2
DLATILE	TOTAL  ORGANIC COMPOS SAMPLE PREPAR	NICS BY  SITION OF RATION ME	OIFFER ORGAN	IC PHASE	BY GA			TOGRAF	ЭНҮ	0N OF:	VOLATILE	SAMPLE (WT%) 76.3 14.5 9.2	SAMPL (WT% 76.3 14.5 9.2 100.0
DLATILE	TOTAL  ORGANIC COMPOS SAMPLE PREPAR DETECTION MET	NICS BY  SITION OF RATION ME	OIFFER ORGAN	IC PHASE	BY GA			TOGRAF	ЭНҮ			SAMPLE (WT%) 76.3 14.5 9.2 100.0	SAMPL (WT% 76.3 14.5 9.2 100.0
DLATILE OMPOUND	TOTAL  ORGANIC COMPOS SAMPLE PREPAR DETECTION MET NAME	NICS BY SITION OF RATION ME	OIFFER ORGAN THODS:	IIC PHASE CS2-EXT FID, 01	BY GA			TOGRAF	PHY DSITIO		VOLATILE	SAMPLE (WT%) 76.3 14.5 9.2 100.0	SAMPL (WT% 76.3 14.5 9.2
OLATILE OMPOUND	TOTAL  ORGANIC COMPOS SAMPLE PREPAR DETECTION MET	NICS BY SITION OF RATION ME	OIFFER ORGAN THODS:	IIC PHASE CS2-EXT FID, 01	BY GA			COMP	PHY DSITIO	ON OF:	VOLATILE ORGANICS (WT%)	SAMPLE (WT%) 76.3 14.5 9.2 100.0 VOLATILE ORGANICS (WT%)	SAMPL (WT% 76.3 14.5 9.2 100.0 TOTAL SAMPL (WT%
OLATILE OMPOUND EDIUM AL RICHLORG	TOTAL  ORGANIC COMPOS SAMPLE PREPAR DETECTION MET  NAME LIPHATIC HYDROC DETHANE, 1,1,1-	ITION OF RATION ME HODS	OIFFER ORGAN THODS:	IC PHASE CS2-EXT FID, OT	BY GA			COMPC	PHY DSITIO	ON OF:	VOLATILE ORGANICS (WT%) 44.0	SAMPLE (WT%) 76.3 14.5 9.2 100.0 VOLATILE ORGANICS (WT%)	SAMPL (WT% 76.5 14.5 9.2 100.0 TOTAL SAMPL (WT% 4.0
DLATILE OMPOUND EDIUM AL	TOTAL  ORGANIC COMPOS SAMPLE PREPAR DETECTION MET  NAME LIPHATIC HYDROC	ITION OF RATION ME HODS	OIFFER ORGAN THODS:	IC PHASE CS2-EXT FID, OT	BY GA			COMPO CODE MHC	PHY DSITIO	ON OF: NUMBER 0-75-9 71-55-6	VOLATILE ORGANICS (WT%) 44.0 28.8	SAMPLE (WT%) 76.3 14.5 9.2 100.0 VOLATILE ORGANICS (WT%) 44.0 28.8	SAMPL (WT) 76.3 14.5 9.2 100.0 TOTAL SAMPL (WT) 4.2.6
DLATILE DMPOUND EDIUM AL RICHLORG EAVY ALI	TOTAL  ORGANIC COMPOS SAMPLE PREPAR DETECTION MET  NAME LIPHATIC HYDROC DETHANE, 1,1,1-	ITION OF RATION ME HODS	OIFFER ORGAN THODS:	IC PHASE CS2-EXT FID, OT	BY GA			COMPO	PHY DSITIO	ON OF: NUMBER 0-75-9	VOLATILE ORGANICS (WT%) 44.0 28.8	SAMPLE (WT%) 76.3 14.5 9.2 100.0 VOLATILE ORGANICS (WT%) 44.0 28.8	SAMPL (WT) 76.3 14.5 9.2 100.0 TOTAL SAMPL (WT) 4.2.6
DMPOUND EDIUM AL RICHLORE	TOTAL  ORGANIC COMPOS SAMPLE PREPAR DETECTION MET  NAME LIPHATIC HYDROC DETHANE, 1,1,1-	ITION OF RATION ME HODS	OIFFER ORGAN THODS:	IC PHASE CS2-EXT FID, OT	BY GA			COMPO	PHY DSITIO	ON OF: NUMBER 0-75-9 71-55-6	VOLATILE ORGANICS (WT%) 44.0 28.8 27.2	SAMPLE (WT%) 76.3 14.5 9.2 100.0 VOLATILE ORGANICS (WT%) 44.0 28.8 27.2	TOTAL SAMPI (WT) 76.3 14.9 9.3 100.0
DATILE DAPOUND DIUM AL RICHLORG AVY ALI	TOTAL  ORGANIC COMPOS SAMPLE PREPAR DETECTION MET  NAME LIPHATIC HYDROC DETHANE, 1,1,1- IPHATIC HYDROCA	ITION OF ATION ME HODS ARBONS (C	ORGAN THODS:	CS2-EXT FID, OT	E BY GA	AS CHI	ROMAT	COMPO CODE MHC 111 HHC	PHY DSITIO	ON OF: NUMBER 0-75-9 71-55-6 0-34-0	VOLATILE ORGANICS (WT%) 44.0 28.8	SAMPLE (WT%) 76.3 14.5 9.2 100.0 VOLATILE ORGANICS (WT%) 44.0 28.8 27.2	TOTAL SAMPI (WTS 4.0
DEATILE DMPOUND EDIUM AL RICHLORG EAVY ALI	TOTAL  ORGANIC COMPOS SAMPLE PREPAR DETECTION MET  NAME LIPHATIC HYDROC DETHANE, 1,1,1- IPHATIC HYDROCA	ITION OF ATION ME HODS ARBONS (C	ORGAN THODS:	CS2-EXT FID, OT	E BY GA	AS CHI	ROMAT	COMPO CODE MHC 111 HHC	PHY DSITIO	ON OF: NUMBER 0-75-9 71-55-6 0-34-0	VOLATILE ORGANICS (WT%) 44.0 28.8 27.2	SAMPLE (WT%) 76.3 14.5 9.2 100.0 VOLATILE ORGANICS (WT%) 44.0 28.8 27.2	TOTAL SAMPI (WTS 4.0
DEATILE DMPOUND EDIUM AL RICHLORG EAVY ALI	TOTAL  ORGANIC COMPOS SAMPLE PREPAR DETECTION MET  NAME LIPHATIC HYDROC DETHANE, 1,1,1-	ITION OF ATION ME HODS ARBONS (C	ORGAN THODS:	IC PHASE CS2-EXT FID, OT	E BY GARACT	AS CHE	ROMAT	COMPO CODE MHC 111 HHC	PHY DSITIO CAS	ON OF: NUMBER 0-75-9 71-55-6 0-34-0	VOLATILE ORGANICS (WT%) 44.0 28.8 27.2	SAMPLE (WT%) 76.3 14.5 9.2 100.0  VOLATILE ORGANICS (WT%) 44.0 28.8 27.2	TOTAL SAMPI (WT) 76.3 14.9 9.3 100.0
DEATILE DMPOUND EDIUM AL RICHLORG EAVY ALI	TOTAL  ORGANIC COMPOS SAMPLE PREPAR DETECTION MET  NAME LIPHATIC HYDROC DETHANE, 1,1,1- IPHATIC HYDROCA  OF VOLATILE ORG ALCOHOLS	TITION OF TATION ME HODS  ARBONS (C	ORGANITHODS:	IC PHASE CS2-EXT FID, OT	E BY GA	CHEP	ROMAT	COMPO CODE MHC 111 HHC	CAS  CAS  SS WT	ON OF:  NUMBER  0-75-9 71-55-6 0-34-0	VOLATILE ORGANICS (WT%) 44.0 28.8 27.2 100.0	SAMPLE (WT%) 76.3 14.5 9.2 100.0  VOLATILE ORGANICS (WT%) 44.0 28.8 27.2	SAMPL (WT) 76.3 14.5 9.2 100.0 TOTAL SAMPL (WT) 4.0 2.5
OLATILE  OMPOUND EDIUM ALE RICHLORGE EAVY ALE	TOTAL  ORGANIC COMPOS SAMPLE PREPAR DETECTION MET  NAME LIPHATIC HYDROC DETHANE, 1,1,1- IPHATIC HYDROCA  OF VOLATILE ORG ALCOHOLS AROMATIC HYDR	TITION OF TATION ME HODS  ARBONS (C	ORGAN THODS: C9-C13	CS2-EXT FID, OT	E BY GA	CHEP ALIPH CHLOS	ROMAT MICAL HATIO RINA	COMPO CODE MHC 111 HHC	CAS  CAS  SS WT	ON OF:  NUMBER  0-75-9 71-55-6 0-34-0	VOLATILE ORGANICS (WT%) 44.0 28.8 27.2 100.0	SAMPLE (WT%) 76.3 14.5 9.2 100.0  VOLATILE ORGANICS (WT%) 44.0 28.8 27.2 100.0	SAMPL (WT) 76.3 14.5 9.2 100.0 TOTAL SAMPL (WT) 4.0 2.5
OLATILE  OMPOUND EDIUM ALE RICHLORGE EAVY ALE	TOTAL  ORGANIC COMPOS SAMPLE PREPAR DETECTION MET  NAME LIPHATIC HYDROC DETHANE, 1,1,1- IPHATIC HYDROCA  OF VOLATILE ORG ALCOHOLS AROMATIC HYDR ESTERS	ITION OF RATION ME HODS CARBONS (CARBONS (CARBON	ORGAN THODS: C9-C13	CS2-EXT FID, OT	BY GA RACT HER	CHE ALIPH	ROMAT MICA HATIO RINA RS	COMPO CODE MHC 111 HHC	CAS  CAS  SS WT	ON OF:  NUMBER  0-75-9 71-55-6 0-34-0	VOLATILE ORGANICS (WT%) 44.0 28.8 27.2 100.0	SAMPLE (WT%) 76.3 14.5 9.2 100.0  VOLATILE ORGANICS (WT%) 44.0 28.8 27.2 100.0	SAMPL (WT) 76.3 14.5 9.2 100.0 TOTAL SAMPL (WT) 4.0 2.5
DLATILE  OMPOUND EDIUM ALE RICHLORGE EAVY ALE  OTAL	TOTAL  ORGANIC COMPOS SAMPLE PREPAR DETECTION MET  NAME LIPHATIC HYDROCA DETHANE, 1,1,1- IPHATIC HYDROCA  OF VOLATILE ORG ALCOHOLS AROMATIC HYDR ESTERS GLYCOL ETHERS	ITION OF RATION ME HODS CARBONS (CARBONS (CARBON	ORGAN THODS: C9-C13	IC PHASE CS2-EXT FID, OT ON BY CO	BY GATRACT THER  DMPOUNE O	CHEP ALIPP CHLOI ETHEI	MICAL HATIO RINA RS BITO	COMPO CODE MHC 111 HHC	CAS  CAS  SS WT  ROCARI	ON OF:  NUMBER 0-75-9 71-55-6 0-34-0 %: BONS	VOLATILE ORGANICS (WT%) 44.0 28.8 27.2 100.0	SAMPLE (WT%) 76.3 14.5 9.2 100.0  VOLATILE ORGANICS (WT%) 44.0 28.8 27.2 100.0	SAMPL (WT) 76.3 14.5 9.2 100.0 TOTAL SAMPL (WT) 4.0 2.5
DEATILE DMPOUND EDIUM AL RICHLORG EAVY ALI	TOTAL  ORGANIC COMPOS SAMPLE PREPAR DETECTION MET  NAME LIPHATIC HYDROCA DETHANE, 1,1,1- IPHATIC HYDROCA  OF VOLATILE ORG ALCOHOLS AROMATIC HYDR ESTERS GLYCOL ETHERS KETONES	ITION OF RATION ME HODS CARBONS (CARBONS (CARBON	ORGAN THODS: C9-C13	IC PHASE CS2-EXT FID, OT ON BY CO	BY GA RACT HER	CHEP ALIPP CHLOI ETHEI	MICAL HATIO RINA RS BITO	COMPO CODE MHC 111 HHC	CAS  CAS  SS WT  ROCARI	ON OF:  NUMBER 0-75-9 71-55-6 0-34-0 %: BONS	VOLATILE ORGANICS (WT%) 44.0 28.8 27.2 100.0	SAMPLE (WT%) 76.3 14.5 9.2 100.0  VOLATILE ORGANICS (WT%) 44.0 28.8 27.2 100.0	SAMPL (WT) 76.3 14.5 9.2 100.0 TOTAL SAMPL (WT) 4.0 2.5
DATILE DMPOUND EDIUM AL RICHLORG EAVY ALI DTAL UMMARY C	TOTAL  ORGANIC COMPOS SAMPLE PREPAR DETECTION MET  NAME LIPHATIC HYDROCA DETHANE, 1,1,1- IPHATIC HYDROCA  OF VOLATILE ORG ALCOHOLS AROMATIC HYDR ESTERS GLYCOL ETHERS KETONES	ITION OF RATION ME HODS  CARBONS (CARBONS (CARBO	ORGAN THODS: C9-C13	IC PHASE CS2-EXT FID, OT ON BY CO	BY GATRACT THER  DMPOUNE O	CHEP ALIPP CHLOI ETHEI	MICAL HATIO RINA RS BITO	COMPO CODE MHC 111 HHC	CAS  CAS  SS WT  ROCARI	ON OF:  NUMBER 0-75-9 71-55-6 0-34-0 %: BONS	VOLATILE ORGANICS (WT%) 44.0 28.8 27.2 100.0	SAMPLE (WT%) 76.3 14.5 9.2 100.0  VOLATILE ORGANICS (WT%) 44.0 28.8 27.2 100.0	SAMPL (WT) 76.3 14.5 9.2 100.0 TOTAL SAMPL (WT) 4.0 2.5
DATILE DMPOUND EDIUM AL RICHLORG EAVY ALI DTAL	TOTAL  ORGANIC COMPOS SAMPLE PREPAR DETECTION MET  NAME LIPHATIC HYDROCA DETHANE, 1,1,1- IPHATIC HYDROCA  OF VOLATILE ORG ALCOHOLS AROMATIC HYDR ESTERS GLYCOL ETHERS KETONES	ITION OF ATION ME HODS  CARBONS (CARBONS (CARBON	ORGAN THODS: C9-C13	IC PHASE CS2-EXT FID, 01	BY GA RACT THER	CHEP ALIP CHLOS ETHES INHIE NITRO	MICA HATIO RINA RS BITOI OGEN	COMPO CODE MHC 111 HHC	CAS  CAS  SS WT  ROCARI	ON OF:  NUMBER 0-75-9 71-55-6 0-34-0 %: BONS	VOLATILE ORGANICS (WT%) 44.0 28.8 27.2 100.0	SAMPLE (WT%) 76.3 14.5 9.2 100.0  VOLATILE ORGANICS (WT%) 44.0 28.8 27.2 100.0	TOTAL SAMPI (WT) 76.3 14.9 9.3 100.0

## SAFETY KLEEN CORP. PREQUALIFICATION EVALUATION MATERIAL ANALYSIS

PAGE 2 UF 3 COMPLETE: 11/03/89 CONTROL#: 0047263-4 SAMPLE#: 068343

ACCEPT

FLUID RECOVERY THINSON CONTROLS

NO ATTACHMENT

TOTAL 970 < 50 CPS 100.0	COLOR WATER C <b>ONTENT</b> NON-VOLATILE RE	L SAMPLE	<del></del>	THE SECTION OF THE SE		A 4			
COLOR MATER CONTENT : 76.3 WT% NON-VOLATILE RESIDUE: 14.5 WT% DESCRIPTION: DIL FLAMMABILITY : 14.5 WT% DESCRIPTION: DIL FLAMMABILITY : 15.5 WESTAFLASH : 15.	COLOR WATER C <b>ONTENT</b> NON-VOLATILE RE	· MIHTT							
MATER CONTENT VON-VOLATILE RESIDUE: 14.3 WIT DESCRIPTION: DIL FLAMMABILITY VON PLASH AT 142 F BY SETAFLASH PLAMMABILITY VO FLASH AT 142 F BY SETAFLASH PROPORTION: OF TOTAL SAMPLE  RADIDACTIVITY VONE DETECTED  RADIDACTIVITY VONE DETECTED  RADIDACTIVITY VONE DETECTED  RADIDACTIVITY VONE DETECTED  REAT COMPENT: ON OF TOTAL SAMPLE  HEAT COMPENT: SOMED 85/15  TALS CONTENT OF TOTAL SAMPLE  HEAT COMPENT: BOMBED 85/15  TALS CONTENT OF TOTAL SAMPLE (PPM): DIGEST BARIUM (DOOS) BA: 67 COPPER CU: 9 IRON FE: 69 BARIUM (DOOS) BA: 67 COPPER CU: 9 IRON FE: 69 BARIUM (DOOS) PB: 38 TITANIUM TI: 1 ZIMON BI: 13 MANABANASES MM: 2 PROSPHORUS P: 22 SIMON BI: 13 MANABANESE MM: 2 PROSPHORUS P: 22 SIMON BI: 13 MANABANESE MM: 2 PROSPHORUS P: 22 SIMON BI: 13 MANABANESE MM: 2 PROSPHORUS P: 22 SIMON BI: 13 MANABANESE MM: 2 PROSPHORUS P: 22 SIMON BI: 13 MANABANESE MM: 2 PROSPHORUS P: 22 SIMON BI: 13 MANABANESE MM: 2 PROSPHORUS P: 22 SIMON BI: 13 MANABANESE MM: 2 PROSPHORUS P: 12 SIMON BI: 13 MANABANESE MM: 2 PROSPHORUS P: 12 SIMON BI: 13 MANABANESE MM: 2 PROSPHORUS P: 12 SIMON BI: 13 MANABANESE MM: 2 PROSPHORUS P: 12 SIMON BI: 13 MANABANESE MM: 2 PROSPHORUS P: 12 SIMON BI: 13 MANABANESE MM: 2 PROSPHORUS P: 12 SIMON BI: 13 MANABANESE MM: 2 PROSPHORUS P: 12 SIMON BI: 13 MANABANESE MM: 2 PROSPHORUS P: 12 SIMON BI: 13 MANABANESE MM: 2 PROSPHORUS P: 12 SIMON BI: 13 MANABANESE MM: 2 PROSPHORUS P: 12 SIMON BI: 13 MANABANESE MM: 2 PROSPHORUS P: 12 SIMON BI: 13 MANABANESE MM: 2 PROSPHORUS P: 12 SIMON BI: 13 MANABANESE MM: 2 PROSPHORUS P: 12 SIMON BI: 13 MANABANESE MM: 2 PROSPHORUS P: 12 SIMON BI: 13 MANABANESE MM: 2 PROSPHORUS P: 12 SIMON BI: 13 MANABANESE MM: 2 PROSPHORUS P: 12 SIMON BI: 13 MANABANESE MM: 2 PROSPHORUS P: 13 SIMON BI: 13 MANABANESE MM: 2 PROSPHORUS P: 13 SIMON BI: 13 MANABANESE MM: 2 PROSPHORUS P: 13 SIMON BI: 13 MANABANESE MM: 2 PROSPHORUS P: 13 SIMON BI: 13 MANABANESE MM: 2 PROSPHORUS P: 13 SIMON BI: 13 MANABANESE MM: 2 PROSPHORUS P: 13 SIMON BI: 13 SIMON BI: 13 SIMON BI: 13 MANABANESE MM: 2 PROSPHORUS P: 13 SIMON BI: 13 SIMON BI:	WATER CONTENT NON-VOLATILE RE	· 76							
PLANMABILITY   NUMBER   142 F BY SETAFLASH   PARAMABILITY   NOME OFTECTED   SMETER   5.6	NON-VOLATILE RE		.3 WT%						
PLANMABILITY   NUMBER   142 F BY SETAFLASH   PARAMABILITY   NOME OFTECTED   SMETER   5.6		ESIDUE: 14	.5 WT% DESC	RIPTION:	OT:				
PH	FLAMMABILITY	: NO FLAS	SH AT 142 F	BY SETAR	LASH				
PH	FLAMMABILITY	: NO FE	ASH 102 F	BY SETAR	LASH			-	
RADIOACTIVITY   NONE DETECTED	PH		CT RV MET	TER 6.6	4				
HEAT CONTENT:   2000 BTUI/LB	RADIOACTIVITY	: NONE DE	ETECTED					1	
HEAT CONTENT:   2000 BTUI/LB	EL EVALUATION OF TOTAL	SAMPLE				<del></del>		`	
TLUGRINE   F   C	HEAT CONTENT:	20	DOO BTU/LB		ASH UPO	N COMBUST			
TALS CONTENT OF TOTAL SAMPLE (PPM): DIGEST BY: ICP  BARIUM (DOOS) BA: 67 COPPER CU: 9 IRON FE: 69  LEAD (DOOS) PB: 36 TITANIUM TI: 1 ZIMO ZN: 60  SILICON SI: 100 ALUMINUM AL: 5 BORON B: 13  MAGNESTUM MG: 11 SODIUM NA: 71 CALCIUM CA: 36  MANGARESE MN: 2 PHOSPHORUS P: 22 SILVER (DOI1) AG: 41  ARSENIC (DOO4) AS: 1 BERYLLIUM BE: 1 CADMIUM (DOOS) CD: 4 1  CHROMIUM (DOO7) CR: 4 MERCURY (DOOS) HG: 4 1 POTASIUM K: 4 1  MOLYBORNM MG: 1 NICKEL NI: 4 PATISHONY SE: 1  MOLYBORNM MG: 1 NICKEL NI: 4 PATISHONY SE: 1  MOLYBORNM MG: 1 NICKEL NI: 4 PATISHONY SE: 1  MOLYBORNM MG: 1 NICKEL NI: 4 PATISHONY SE: 1  MOLYBORNM MG: 1 NICKEL NI: 4 PATISHONY SE: 1  MOLYBORNM MG: 4 NICKEL NI: 4 PATISHONY SE: 4 1  MOLYBORNM MG: 5 NICKEL NI: 4 PATISHONY SE: 5 1  MERAL COMPOSITION OF SE: 4 NICKEL NI: 4 PATISHONY SE: 6 1  MOLYBORNM MG: 5 NICKEL NI: 5 NI: 6 NI THALLIUM TL: 1  MOLYBORNM MG: 6 NICKEL NI: 6							BR: < 0	.1 WT%	
TALS CONTENT OF TOTAL SAMPLE (PPM): DIGEST BY: ICP BARIUM (DOOS) BA: 67 COPPER CU: 9 IRON FE: 69 BARIUM (DOOS) BA: 67 COPPER CU: 9 IRON FE: 69 SILICON SI: 100 ALUMINUM AL: 5 BORON B: 13 MAGANESTUM MG: 11 SODDIUM NA: 71 CALCIUM CA: 36 MANGANESTUM MG: 11 SODDIUM NA: 71 CALCIUM CA: 36 MANGANESS MN: 2 PHOSPHORUS P: 22 SILVER (DO11) AG: 4 1 ARSENIC (DOO4) AS: < 1 BERVLLUM BE: < 1 CADMIUM (DOO5) CO: < 1 CHROMIUM (DOO7) CR: < 1 MERCURY (DOO9) HG: < 1 POTASSIUM K: < 1 MOLYBORNUM MO: < 1 NICKEL NI: < 1 ANTIMONY SE: < 1 SELENIUM (DO10) SE: < 1 TIN SN: < 1 THALLIUM TL: < 1 VANADIUM V: < 1  NERAL COMPOSITION:  SPECIFIC VISCOSITY GRAVITY (CENTIPOISE)  ORGANIC PHASE (FREE WATER)  ORGANIC PHASE WATER COMPOSITION OF ORGANIC PHASE BY GAS CHROMATOGRAPHY  SAMPLE PREPARATION METHODS: CSZ-EXTRACT  ORGANIC PHASE WATER COMPOSITION OF ORGANIC PHASE BY GAS CHROMATOGRAPHY  SAMPLE PREPARATION METHODS: CSZ-EXTRACT  ORGANIC PHASE WATER COMPOSITION OF ORGANIC CASENONS  ORGANIC PHASE CHROMATOGRAPHY  SAMPLE PHASE CHROMATOGRAPH			3.1 WT%		SULFUR		S: < 0	.1 WT%	
BARIUM (DOOS) BA: 67 COPPER CU: 9 IRNO FE: 69 LEAD (DOOS) PR: 36 TITANIUM TI: 1 ZINO ZN: 60 SILICON SI: 100 ALUMINUM AL: 5 BORON B: 13 MANGANESIUM MG: 11 SODIUM NA: 71 CALCIUM CA: 36 MANGANESIUM MG: 11 SODIUM NA: 71 CALCIUM (DOOS) CO: 4 I CAMPUNIUM (DOOS) CO: 4 I TINN SN: 4 I THALLIUM TI: 4 I VANADIUM V: 4 I NICKEL NI: 4 ANTIMONY SS: 4 I THALLIUM TI: 4 I VANADIUM V: 4 I TINN SN: 4 I THALLIUM TI: 4 I VANADIUM V: 4 I TINN SN: 4 I THALLIUM TI: 4 I VANADIUM V: 4 I TINN SN: 4 I THALLIUM TI: 4 I VANADIUM V: 4 I TINN SN: 4 I THALLIUM TI: 4 I VANADIUM V: 4 I TINN SN: 4 I THALLIUM TI: 4 I VANADIUM V: 4 I TINN SN: 4 I THALLIUM TI: 4 I VANADIUM V: 4 I TINN SN: 4 I THALLIUM TI: 4 I TINN SN: 4 I THALIUM TI: 4 I TINN SN: 4 I THALLIUM TI: 4 I TINN SN: 4 I	CUMMENTS: BOMBE	בט פט/וט							
LEAD								<del></del>	
SILICON   SI: 100   ALUMINUM   AL: 5   BORON   AN   13   AU   13   AU   AU   AU   AU   AU   AU   AU   A			COPPER		_	IRON		FE:	69
SILICON   SI: 100   ALUMINUM   AL: 5   BORON   B: 13   MANGANESIUM   MG: 11   SODIUM   NA: 71   CALCIUM   CA: 36   MANGANESIUM   MG: 11   SODIUM   NA: 71   CALCIUM   CA: 36   MANGANESIUM   MG: 41   SERVILIUM   BE < 1   CADMIUM   (DOOG)   CC: < 1   CHROMIUM   (DOOG)   CC: < 1   MERCURY   (DOOS)   HG < 1   POTASSIUM   K: < 1   CHROMIUM   (DOOG)   CC: < 1   MERCURY   (DOOS)   HG < 1   POTASSIUM   K: < 1   MINIMONY   SB: < 1   SELENIUM   (DOOG)   SE: < 1   TIN   SN: < 1   THALLIUM   TL: < 1   TL: < 1   THALLIUM   TL: < 1   THALLIUM   TL: < 1			TITANIUM	TI:	; t	ZINC		ZN:	
MAGNESIUM   MG	-		ALUMINUM	AL:	5	BORON		В	-
MANGANESE			SOD-IUM			CALCI	JM-		-
CHROMIUM (DOO7) CR: < 1 MERCURY (DOO9) HG: < 1 ANTIMONY SB: < 1 MICKEL NI: < 1 ANTIMONY SB: < 1 TIN SN: < 1 THALLIUM TL: < 1 ANTIMONY SB: < 1 TIN SN: < 1 THALLIUM TL: < 1 TOTAL SILUM TL: < 1 TIN SN: < 1 THALLIUM TL: < 1 THALLIUM TL: < 1 TOTAL SILUM TL: < 1 THALLIUM TL: < 1 THAL		MN: 2	PHOSPHORUS	5 P:	22	SILVE	R (D011)		
CHROMILIM (DOOT) CR: <   MERCURY (DOOS) HG: <   POTASSIUM K : <   MILKEL NII <   ANTIMONY SB : <   MERCURY (DOOS) HG: <   MICKEL NII <   ANTIMONY SB : <   MERCURY (DOOS) HG: <   MERCURY (DOOS) HOOD HOOS HOOS HOOS HOOS HOOS HOOS HOOS		AS: < 1	BERYLLIUM	BE:	< 1	CADMI	JM (D006)	CD: <	
SELENTUM (DOTO) SET	CHROMIUM (DOO7) (	CR: < 1	MERCURY (	(DOO9) HG:	< . 1	POTAS	SIUM		· ·
SELENTUM (DOTO) SET	MOLYBDENUM N	MO: < 1	NICKEL	NI:	< 1	ANTIM			÷
NRRAL COMPOSITION:   SPECIFIC   VISCOSITY   CENTRIFUGE   APPERANCE TOTAL   COMPOSITION BY: CENTRIFUGE   COMPOSITION OF   COMPOSIT	SELENIUM (DO10) S								4
NERAL COMPOSITION:   SPECIFIC   VISCOSITY   CENTRIFUGE APPEARANCE TOTAL		V ; < 1			•				,
SPECIFIC   VISCOSITY   CENTRIFUGE   APPEARANCE TOT	•					GENI	EDAL COMPO	CTTTAL BV.	
AQUEOUS PHASE (FREE WATER).  AQUEOUS PHASE (FREE WATER).  ORGANIC PHASE (FEEDSTOCK).  BOTTOM SLUDGE (SEMISOLIDS).  BOTTOM SUDGE (SEMISOLIDS).  CO.O.O.O.O.O.O.O.O.O.O.O.O.O.O.O.O.O.			SPEC	CIFIC	VISCOSITY	GEN	CENTRIENCE	TIC MULLIC	
AQUEDUS PHASE (FREE WATER).  ORGANIC PHASE (FREEDSTOCK).  BOTTOM SLUDGE (SEMISOLIDS).  BOTTOM SUDGE (SEMISOLIDS).  OO 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0.0 0		•	CPA\	ITTV (C	THE TRAFFICE	1	(1/019/1		
ORGANIC PHASE (FEEDSTOCK)   20.0   16.0   16   16   16   16   16   16   16   1	AQUEQUS PHASE (	(FREE WATER)			,c.11.1.013E	,	( VOL.A)		
BOTTOM SCUDGE (SEMISOLIDS)	ORGANIC PHASE	(FEEDSTOCK).	· · · · · · · · · · · · · ·				80.0		
TOTAL .970 < 50 CPS 100.0 100.	BOTTOM SLUDGE (	(SEMISOLIDS)					20.0		
TOTAL	BOTTOM SOLID (S	SETTLED SOLIDS	) . <i>.</i>	· · · · · · · · · · · · · · · · · · ·	· • • • • • • • • • • • • • • • • • • •		0.0		0.
TOTAL  WATER CONTENT NON-VOLATILE RESIDUE TOTAL  NON-VOLATILE ORGANICS BY DIFFERENCE  LEATILE ORGANIC COMPOSITION OF ORGANIC PHASE BY GAS CHROMATOGRAPHY SAMPLE PREPARATION METHODS: CS2-EXTRACT DETECTION METHODS: FID, OTHER  COMPOSITION OF: COMPOSITION OF								100.0	
WATER CONTENT	T FCIFIC COMPOSITION OF T	TOTAL CAMBLE							
WATER CONTENT	101/10 COMPOSITION OF	IUIAE SAMPLE			G	OMPOSITIO	4 OF:		TOTAL
WATER CONTENT								(WTW)	
NON-VOLATILE RESIDUE DESCRIPTION: GIL	WATER CONTENT.		<i></i>		. <b></b>			76.5	
TOTAL  ILATILE ORGANIC COMPOSITION OF ORGANIC PHASE BY GAS CHROMATOGRAPHY  SAMPLE PREPARATION METHODS: CS2-EXTRACT  DETECTION METHODS : FID, OTHER  COMPOSITION OF: VOLATILE ORGANICS ORGANICS  MHOUND NAME  CODE CAS NUMBER (WT%) (	. NON-VOLATILE RE	ESIDUE	DESC	RIPTION:	מנו	• • • • • • • • • •	• • • • • • • • • •	/6.3	
TOTAL  ILATILE ORGANIC COMPOSITION OF ORGANIC PHASE BY GAS CHROMATOGRAPHY  SAMPLE PREPARATION METHODS: CS2-EXTRACT  DETECTION METHODS : FID, OTHER  COMPOSITION OF: VOLATILE ORGANICS ORGANICS  MHOUND NAME  CODE CAS NUMBER (WT%) (	VOLATILE ORGANI	ICS BY DIFFEREN	NCF .		011			14.5	
DIATILE ORGANIC COMPOSITION OF ORGANIC PHASE BY GAS CHROMATOGRAPHY  SAMPLE PREPARATION METHODS: CS2-EXTRACT DETECTION METHODS: FID, OTHER  COMPOSITION OF: VOLATILE ORGANICS O			102				• • • • • • • • • •	9.2	9.3
COMPOSITION OF ORGANIC PHASE BY GAS CHROMATOGRAPHY  SAMPLE PREPARATION METHODS: CS2-EXTRACT  DETECTION METHODS: FID, OTHER  COMPOSITION OF: VOLATILE ORGANICS ORGANIC	TOTAL							100.0	100
SAMPLE PREPARATION METHODS: CS2-EXTRACT DETECTION METHODS : FID, OTHER  COMPOSITION OF: VOLATILE ORGANICS SAMP  MPOUND NAME  DIUM ALIPHATIC HYDROCARBONS (C9-C13)  ICHLOROETHANE, 1,1,1-  AVY ALIPHATIC HYDROCARBONS (C14-C20)  TAL  MMARY OF VOLATILE ORGANIC COMPOSITION BY COMPOUND CHEMICAL CLASS WT%:  ALCOHOLS  AROMATIC HYDROCARBONS  O.O ALIPHATIC HYDROCARBONS  AROMATIC HYDROCARBONS  O.O CHLORINATED SOLVENTS  ESTERS  O.O ETHERS  O.O INHIBITORS  O.O NITROGEN COMPOUNDS  O.O NITROGEN COMPOUNDS  O.O NITROGEN COMPOUNDS  O.O NITROGEN COMPOUNDS  ECIFIC ORGANIC COMPOSITION	ATTLE ODGANIC COMPOST	**************************************						100.0	100.
DETECTION METHODS : FID, OTHER  COMPOSITION OF: VOLATILE ORGANICS	SAMPLE PREPARAT			SAS CHRUMA	ATUGRAPHY				
DMPOUND NAME  CODE CAS NUMBER  (WT%) (WT%) (WT%) RICHLOROETHANE, 1,1,1~  RICHLOROETHANE, 1,1,1~  RAVY ALIPHATIC HYDROCARBONS (C14-C20)  DTAL  DIMMARY OF VOLATILE ORGANIC COMPOSITION BY COMPOUND CHEMICAL CLASS WT%:  ALCOHOLS  AROMATIC HYDROCARBONS  O.O ALIPHATIC HYDROCARBONS  AROMATIC HYDROCARBONS  O.O CHLORINATED SOLVENTS  ESTERS  O.O ETHERS  O.O ETHERS  O.O INHIBITORS  O.O NITROGEN COMPOUNDS  O.O NITROGEN COMPOUNDS  O.O PECIFIC ORGANIC COMPOSITION	DETECTION METH	: SOO	FID, OTHER					•	
IMPOUND NAME   CODE CAS NUMBER (WT%) (WT		•			COMPOSIT	ION OF:			
DIUM ALIPHATIC HYDROCARBONS (C9-C13)	MPOUND NAME				CODE CA	C MIMBED			
RICHLORDETHANE, 1,1,1-  INTAL		RBONS (09-013)					, ,	,	•
IMMARY OF VOLATILE ORGANIC COMPOSITION BY COMPOUND CHEMICAL CLASS WT%:  ALCOHOLS AROMATIC HYDROCARBONS O.O ALIPHATIC HYDROCARBONS AROMATIC HYDROCARBONS O.O CHLORINATED SOLVENTS ESTERS O.O ETHERS O.O GLYCOL ETHERS O.O INHIBITORS O.O NITROGEN COMPOUNDS O.O				•			, , , ,		4.0
IMMARY OF VOLATILE ORGANIC COMPOSITION BY COMPOUND CHEMICAL CLASS WT%:  ALCOHOLS AROMATIC HYDROCARBONS O.O CHLORINATED SOLVENTS ESTERS O.O ETHERS O.O ETHERS O.O INHIBITORS O.O KETONES O.O NITROGEN COMPOUNDS O.O		BONS (C14-C20)	•						2.9
MMARY OF VOLATILE ORGANIC COMPOSITION BY COMPOUND CHEMICAL CLASS WT%:  ALCOHOLS  AROMATIC HYDROCARBONS  CSTERS  GLYCOL ETHERS  O.O ETHERS  O.O ETHERS  O.O INHIBITORS  KETONES  O.O NITROGEN COMPOUNDS  O.O  O.O  O.O  O.O  O.O  O.O  O.O  O	TAL			-			100.0		
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AROMATIC HYDROCARBONS O.O CHLORINATED SOLVENTS 28.8 ESTERS O.O ETHERS O.O GLYCOL ETHERS O.O INHIBITORS O.O KETONES O.O NITROGEN COMPOUNDS O.O PECIFIC ORGANIC COMPOSITION	ALCOHOLS						71.2		
ESTERS 0.0 ETHERS 0.0 GLYCOL ETHERS 0.0 INHIBITORS 0.0 KETONES 0.0 NITROGEN COMPOUNDS 0.0 PECIFIC ORGANIC COMPOSITION	_	CARBONS	0.0						
GLYCOL ETHERS 0.0 INHIBITORS 0.0 KETONES 0.0 NITROGEN COMPOUNDS 0.0 PECIFIC ORGANIC COMPOSITION	ESTERS					-			
KETONES 0.0 NITROGEN COMPOUNDS 0.0 PECIFIC ORGANIC COMPOSITION	GLYCOL ETHERS				DRS				
	KETONES				-	S			
POLYCHLORINATED BIPHENYLS (PCBS): NONE DETECTED <	and the second s								

\_80918 - R2271 (RUN 11/03/89)

#### SAFETY-KLEEN CORP. PREQUALIFICATION EVALUATION MATERIAL ANALYSIS

PAGE 3 OF 3

COMPLETE: 11/03/89 CONTROL#: 0047283-4 SAMPLE# : 068343

ACCEPT

NO ATTACHMENT

LUID RECOVERY OHNSON CONTROLS

LEVEL:

LABORATORY REVIEW: R

HIGH WATER, LOW BTU

LEVEL: SEG COD LAB REVIEWERS: LC. LC

SEG CODE:

FLUID RECOVERY

ANALYZED: 11/01/89

TRACKING INFORMATION: RELEASED: 11/01/89

SURVEY RECEIVED : SAMPLE RECEIVED : RESAMPLE SHIPPED : RESAMPLE RECEIVED:

FACILITY DATE 10/09/89 SK TECHNICAL CEN

10/09/89

#### NOTICE OF LAND DISPOSAL RESTRICTION OF WASTE

EPA ID No.:

ILD980613913

SAFETY-KLEEN CORP 633 EAST 138TH ST DOLTON IL 60419

TO:

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		*		
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7/587			as 11d) the	
Under manifest number LA OVA line num	ber (er	nter 11a, 11b, 11c,	40 CDE Bost	
generator noted below is shipping to you a waste of	setermined to b	e restricted under	40 CMF Fait	
268. In accordance with 40 CFR 268.7, the gener	ator nereby pro	ovides notice that the	10 VV3510 15	
restricted and the EPA waste type and the appropria	ite treatment st	andards (from Table	, CCVVE 01 40	-
CFR 268.41) are as follows:				
		5005)		
EPA Waste Type: FOO1 (Enter FOO1, FOO	12, 5003, 5004	or Fuudi		
	TREATMENT :	STANDARDS (mg/1)	ı	
•		All Other	Check All	
	Wastewater		That Apply	
F001-F005 Solvents	w/Solvents	Solvent Waste	That Apply	
	0.05	0.59		
Acetone	0.05	5.0		
n-Butyl alcohol	5.0	4.81		
Carbon disulfide	1.05 .05	.96		-
Carbon tetrachloride	. 15	.05	ALCOHOLD AND	
Chlorobenzene	2.82	.75		
Cresols (and cresylic acid)	, 125	.75		
Cyclohexanone	. 68	. 125		
1,2-dichlorobenzene	; .O5	. 75		
Ethyl acetate	.05	.053		
Ethyl benzene	.05	.75		
Ethyl ether	5.0	5.0	<del></del>	
Isobutanol	, 25	-, 75	<del></del>	
Methanol	. 20	96		
Methylene chloride	12.7	. 96		
Methylene chloride(from pharmaceutical industry)	0.05	0.75		
Methyl ethyl ketone	0.05	0.33		
Methyl isobutyl ketone	0.66	0.125		
Nitrobenzene	1.12	0.33	<del></del>	
Pyridine	0.079	0.05	<del></del>	
Tetrachloroethylene	1.12	0.33		
Toluene	1.05	0.41	<del></del>	
1,1,1-Trichloroethane 1,1,2-Trichloro - 1,2,2 trifluroethane	1.05	0.96		•
	0.062	0.091		
Trichloroethylene Trichlorofluoromethane	0.05	0.96		
********	0.05	0.15		
Xylene	-			
•				
		EPA		
Generator Name: JOHNSON CONTROLS		ID: <u>IND00954</u>	9593	
delication (1210)	1	1 1		
$\mathcal{L}$	<i>_//</i> 1	ر ما الما الما		
Generator Representative Signature:	MU 1	(Seek)		
	<del></del>			
	10-11-1	. i		
Name & Title of Representative:	LEE HECK	MANYFACT	YRING ENG	INEER
	(print or	type)		
. '				
Car Campia Number: 088343		CONTROL	# 0047263	

BRANCH   ENVIROSYSTEMS		SK Sample No:	77300
PC PR RECYCLE TOLLING BRESLUBE QC	Safety-Ricen ⊕	SK USE ONLY SK Control No: _	
	MATERIAL SURVEY	Date Received: _	_
A. Company Name One Contraction (ontraction)  Billing Address  Street 120) E. Illonroe 57	EPA ID No. (Fede	495913 12	KhayT
city Goshen State IN			Zip
Nature of Business M+6 OF C	ontras	S.I.C	
State ID Numbers: Illinois ID Manifest Address:   Billing Address	Missouri ID		
B. Material Description $\mu_{\gamma} \Delta \delta + C$	D. Maţerial Comp	position (vol%) Min	Max Typical
Process Description Waste From	(00/a		
// a ch . nes Volume (gal.) / 500/ XWk □ Mth □ Qtr □			10%
Volume on Hand (gal.) /,000	·		
Storage Capacity (gal.) //500 In Drur Shipping Frequency WK In Drur	ms X Bulk		
C. Physical Description Color	- Tan		5.7
Layers □ One > Two □	Three Non-volatile Mate		88 8
Physical State	I Settled Solids		
E. Attach material safety data sheets for material con		unication under OSHA (Re	of 20 CER 1910 1200)
Attach any current analysis of the material.			
F. Check all of the following substances which may be	n the material.	dentify if present A	mount Units
<ul> <li>DOT Corrosives, Poisons, Forbiddens, Radioactiv</li> <li>TSCA regulated materials (PCB, PBB, Chlorinated</li> </ul>			
☐ Materials used exclusively as pesticides, herbicide	es, insecticides, etc		
OSHA carcinogens above exclusion levels (Ref. 2 Toxic components with OSHA PEL or ACGIH TLV		***************************************	
Toxic metals (Arsenic, Beryllium, Cadmium, Merci	ıry, Selenium).		
Reactive components (Sulfides, Cyanides, Shock  Water reactive components (Isocyanates, Acid Ch		· · · · · · · · · · · · · · · · · · ·	
Biological hazards (Pathogenics, Infectious agent	s, Etiologic agents, etc.).		
None of the above Special Handling Requ	ired		
G. DOT Hazardous Material Description (Ref. 49 C	· •	ous Waste Description (F )	F001   F002   F003
Hazard Class Number Number Not DOT Hazardous Material 😾 Need assistance		C D T C C	<del></del>
		rdous Waste Need a	
I. Safety-Kleen requires a sample and charges a fe Type of sample: ☐ grab ★ tank ☐ composite of	#drums Sample taken by	☐ Customer Safet	y-Kleen Representative
J. To the best of my knowledge, this is an accurate			
Name MIKE STOUDEN	Title <u>#422</u> 2	CRDOUS W	9576
Signature Mike Stonler		5-90 Phone	91533-2111
Comments IF OK For oil.	suis flease o	$\times$	****

Sales Representative Name 1977 (u/lou f)

Representative # 6699

Branch # 5-082-0/



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ATT. - \$PR □

Required under authority of Act 64, P.A. 1979, as amended and Act 135, P.A.

Failure to file is punishable under section 299.548 MCL or Section 10 of Act 136, P.A. 1969.

Messe print or type.	Fam Approved OMB No. 2050-0039 Expires 9:30-31
UNIFORM HAZARDOUS Generator's US EPAID No. Manifest	2. Page 1 _ Information in the shaded areas
WASTE MANIFEST FEMBROOF STATES Y 3 2 11 4	Jaw Street Manifest Cocumon Number
Johnson Controls	and the second s
1302 K. Nonroe St. 10 46526 219-533-2111	B Stock Benefitter 125
Generator's Phone ( )  Superator's Phone ( )  Guide Bransporter 1 Company Name ( )  Guide Bransporter 1 Company Name ( )	
	C. State: transporter elipse  D. transporter's Phone (1995)
7. Iransporter 2 Company Name 8. US EPA ID Number	E_State Transporter 4-10
9. Designated Facility Name and Site Address 10. US EPA ID Number	[Ansporter & Phone   1997]
Titulian Disposal Anna	G State Facility's ID
18350 J. 1-94 S. (1895 be.	REPORT TORK
Belleville Blue Proper Shipping Marger Class and 12 Conta	iners 1979 1979
THE US DOT Description fincluding Proper Shipping Name, Hazard Class, and ID NUMBER).	Total Unit Type Quantity W/Vol
Corresive United (EPA Corresivity)	nin000515
CONTROL OF THE CONTRO	
O WASTE CAUSTIC SLUDGE	
A CONTROL STATE OF THE PROPERTY OF THE PROPERT	in Inding Objects Walter
A DESCRIPTION OF THE PARTY OF THE PARTY.	D.C.
	<u> </u>
16 Special Handling Instructions and Additional Information	
GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately	described above by
** The proper snipping name and are classified, packed, marked, and labeled, and are in air respects in proper condition  *** The proper snipping to applicable international and national government regulations.	for transport by highway
If I am a large quantity generator, it certify that I have a program in place to reduce the volume and toxicity to be economically practicable and that I have selected the practicable method of treatment, storage, or di	of waste generated to the degree I have determined
present and future threat to human health and the environment, OR; if I am a small quantity generator, I a generation and select the best waste management method that is available to me and that I can aff	have made a good faith effort to minimize my waste. I
	Date West
Printed Typed Name Signature Signature	Month Day Gar
	Date
T 17. Transporter 1. Acknowledgement of Receipt of Materials  Printed/Typed Name  18. Transporter 2 Acknowledgement or Receipt of Materials  Printed/Typed Name  Signature  Signature	Wonth Day Ygar
9 18. Transporter 2 Acknowledgement or Receipt of Materials	03/170
Signature Signature	Month Day Year
	See
19. Discrepancy Indication Space, Cyanide Spot Test IN  KeTect, Cyanide Spot Test IN  Laved Not Indicate on	dicate High Cyands
Gred Not Judicate on	VICTOR APPROVED
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this m	2 2/17/70 10
hem 19	Oats
Printed/Typed Name Signature	Month Day Year
Jum Mary Jakes	Mark IIII
EPA Form 8700-22 (Bev. 9/88) To be mailed by Michigan DNR	PR 5110 Rev. 9/88

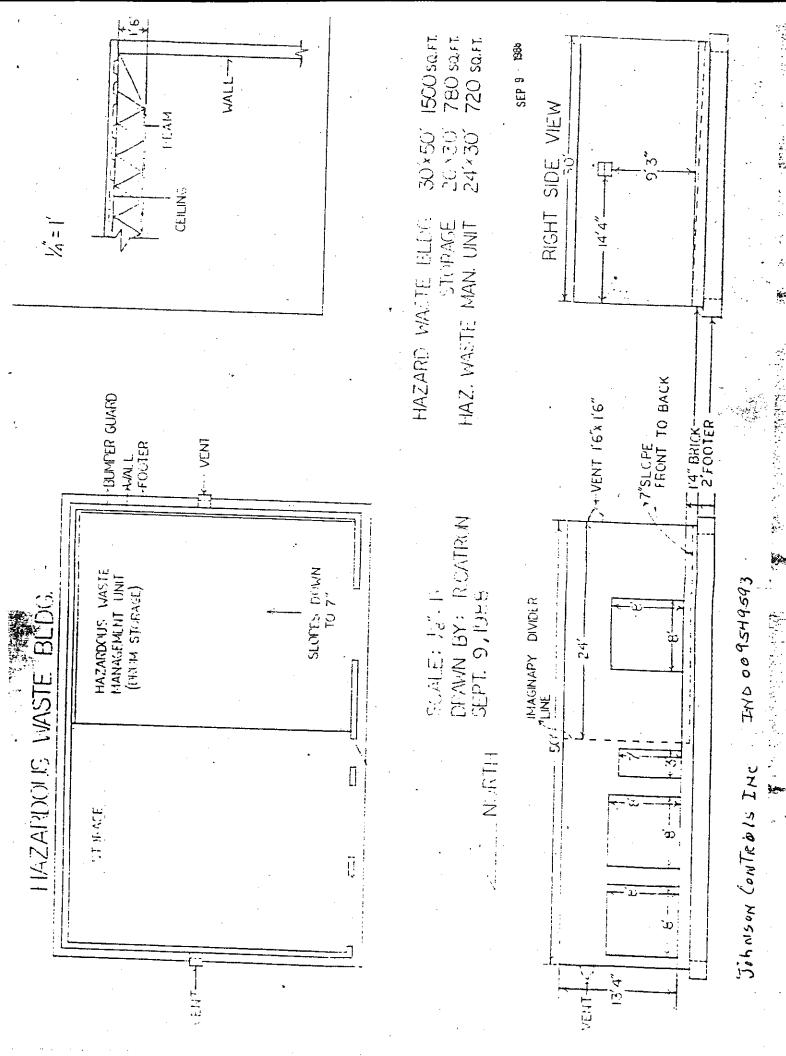
Month,

Day

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT OFFICE OF SOLID AND HAZARDOUS WASTE MANAGEMENT

Indianapolis, IN 46207-7035		5-082-01		
PLEASE PRINT OR TYPE (Form)	designed for use on elite (12-pitch)	typewriter.) Form	Approved. OMB No. 2	050-0039. Expires 9-30-
ONI ONIVI IAZANDOOS	Generator's US EPA ID No.  N' D' O'	Manifest Document No. 2: 6: 8: 8: 4	Page 1 Information of requirements D. F. State law.	n in the shaded areas red by Federal law, bu , H and I are required b
3. Generator's Name and Mailing Address JOHNSON CONTROLS 1302 E MONROE		A Gregory	NA 0457	ent Number
4. Generator's Phone ( 219 533-211	46526-4297 11	.   3	State Generator's ID	
5. Transporter 1 Company Name SAFETY-KLEEN CORP.	6. Use EPA ID Nu	1 A A A A A A L	. State Transporter's iD	}
7. Transporter 2 Company Name	8. Use EPA ID Nu	mber E	. State Transporter's ID	219 289-4510
9 SAFET POTENT NOTE POUR SITE Address 2217 WESTERN AVENUE	5-082-01 <sup>10.</sup> Use EPA ID No		Transporter's Phone  State Facility's ID	
SOUTH BEND, IN 46628	INDOO	7,1,5,4,7,4	. Facility's Phone	219 289-4510
11. US DOT Description (Including Proper Shipping	Name, Hazard Class, and ID Numb	12. Containers Property No. Type	13. Total Quantity V	14. I. Unit Waste No. Vt/Vol.
WASTE PETROLEUM NAPHTI COMBUSTIBLE LIQUID UN1255	HA 5(D001)(ERG #27)	006 DM	20415	P D001
b		<u> UUa ·</u>	0.07	
•			,	
C.				-
d. THAT THE WASTE DESCRIBED A RESTRICTED WASTE, THE WAST TREATMENT STANDARDS ARE NO COMPOUNDS (1000 MG/L) J. Additional Descriptions for Materials Listed Above	AS 'WASTE PETROLEUM TE CONTAINS THE FOLI	NAPHTHA' IS A LOWING CONSTITU ATED PREANIC .	T	s Listed Above
r				
15. Special Handling Instructions and Additional Inform	nation 9027 169079	41 926884 5-082	2-01-4068 13	
EMERGENCY RESP#1-708-888-4	660 SKDOT# A: 501 B:	C:	D:	*
16. GENERATOR'S CERTIFICATION: I hereby decla proper shipping name and are classified, pack according to applicable international and national and national and national areas of the control of the cont	ed, marked, and labeled, and are i			
If I am a large quantity generator, I certify the determined to be economically practicable at which minimizes the present and future threa effort to minimize my waste generation and se	nd that I have selected the practic at to human health and the enviro	able method of treatment enment; OR, if I am a sma	., storage, or disposa Il quantity generator,	I currently available to I have made a good f
Printed/Typed Name	Signsturę	in Ald	Do	Month Day 14
17. Transporter 1 Acknowledgement of Receipt of Ma	aterials L	CCC ACX		01034
The Sed Name 1250	54'	) = F	2 Agri	Month Day
18. Transporter 2 Acknowledgement of Receipt of Ma			7000	
Printed/Typed Name	Signature			Month Day Y
19. Discrepancy Indication Space				
-				
20. Facility Owner or Operator: Certification of receip	nt of hazardous materials coursed by	this manifest event as act	od Itom 10	
Printed/Typed Name	Signature	and mannest event as note	MARCHITT.	'Month Day Y

EPA Form 8700-22 Previous editions are obsolete. State Form 11865 (R/1003)



\$2.00 P

一部の人の動物を持ちない



## Michigan Disposal, Inc.

Environmental Protection Facility 49350 North I-94 Service Drive Belleville, Michigan 48111 (313) 697-7830

46113 09712.

Approval Minimum : OPSIZ College

JOHNSON CONTROLD [302 F. MONROE

GOSHEN

LN 46526

ATTH: MARILIN RULTZMAN

Po: Wise disposal at MICHIGAN (ISPOSAL FIG. RPA identification Number MIU0007/1831

Bear irzMadam,

This letter acknowledges the acceptability of the waste described below for createent at our Belleville, electrons callifity.

- 4. General reserration: WARTE WATER TREATMENT SHURGE
- 2. MPA Wante Code: FOU6
- 3. Generator EPA Edentification Number: IND009549593
- 4. Please refer to our approval number 005173. GEE when surpping or making any inquirtes about the waste stream

PLEASE NOTE: This approval is based on information supplied to us by your company. A copy of the base information we reviewed, signed by your representative, is attached. As the Generator you are cosponsible for the occuracy of the characterization information. If there are any errors or changes to this information please notify us immediately. Control your cransporter or profer to arrange delivery of the vacue.

If you have any questions, please do not haditate to delt us as (313) 697-7930 or (313) 485-6485.

Havardous: Wasto Coordinator



## FORM G: GENERATOR REPORT

I OILII O.	• GENERA	AIOR REP	ONI	
or more	than 2.2 lbs of a	cute hazardous		hazardous waste,
(Collected under the authority)	ority of Indiana	Environmental	Management Act)	
X. GENERATOR'S EPA I.D. NUMBER 1	- 	5 4 9 5	9   3	
XI. NAME OF FACILITY (Where your hazardor		nt).	FACILITY'S	EPA ID
ENVIRONMENTAL WAS	IIE   CON	rroll i h	C M   I   D   O   5   7	0102602
XII. ADDRESS OF FACILITY (Where your haz	ardous waste wa	s sent).		
Street Or P.O. Box 2171114101   P1	RINCET	O N 1 1 1	111111	
City Or Town INKSTER				
Stat	e M   I	Zip (	Code 4 8 1 4 1	
List the EPA Identification Numbers and Nar				
XIV. WASTE IDENTIFICATION (See Tables II	II & IV for corre	ct codes for item	s B & C)	
(A) DESCRIPTION OF WASTE	(8) ȘOURCE CODE	(D) EPA HAZARDOUS	(E) AMOUNT OF	(F) UNIT OF MEASURE (circle one)
(45 characters or less)	(C) WASTE FORM CODE	CODE(S)	WASTE	(G) DENSITY
. UNTREATED PLATING SLUDGE WITH	·  B  506		·	рткм 🕲 і.
CYANIDES	A 2 2	F007	3 3 0	8.8 ·
				PTKMGL
2				lbs/gai   sg
quintermatics interference and the second se	1			PTKMGL

1 1 1

PAGE \_ 7 OF \_ 20 (OVER)

☐ Ibs/gal

PTKMGL

☐ lbs/qal ☐ sg

sg:



JOHNSON CONTROLS, INC. 1302 EAST MONROE STREET GOSHEN GEN TSD IND009549593

## FORM I: INSTALLATION IDENTIFICATION FORM

	O MUST COMPLETE FORM I? Every site that receive	
	<b>TRUCTIONS:</b> Please refer to the specific instructions befor quired by IC 13-7-8.5-2.	e completing an forms. The information requested herein
l.	INSTALLATION'S EPA I.D. NUMBER   I   N   D   C	0   9   5   4   9   5   9   3
11.	NAME OF INSTALLATION JOHN SON CO	O N T R O L S   I N C
111.	INSTALLATION MAILING ADDRESS	
	Street Or P.O. Box 1 3 0 2 E A S T MON  City Or Town G O S H E N 1 1 1 1 1 1	R O E   S T
	State I N	Zip Code   4   6   5   2   6
IV.	LOCATION OF INSTALLATION	
	Street Or P.O. Box	
	State   Zip Code	County
V.	HAZARDOUS WASTE ACTIVITY  Mark the boxes that reflect the activities at your facility in	1989.
e sanna	Large Quantity Generator (G) generated 1,000 or more kg/month of RCRA hazardous waste	RCRA Exempt treatment, recycling or disposal was conducted in RCRA exempt units
	Small Quantity Generator (SQG) generated between 100-1,000 kg/month of RCRA hazardous waste	
	Conditionally Exempt Generator (CEG) generated less than 100 kg/month of RCRA hazardous waste	
	Transporter (T) transported RCRA hazardous waste	
	Treatment, Storage or Disposal Facility (TSD) operated under interim status or a final RCRA permi	t
-	Non handler Did not handle RCRA hazardous waste because:	
	We never generated	Occasional generator (but none in 1989)
	We are out of business Only excluded or delisted waste	Other (Specify in Comments)  PAGE 1 OF 2 (OVER)
	Only excluded of defisied waste.	

	see if items II, IV, & V are identical to the information in the label on Form I. If not, please indicate why
VI ST	'ATUS CHANGES
	a. We have moved.
	b. We have changed ownership.
	] c. We have changed hazardous waste activity.
÷*	If any of the above three boxes are marked, you will need to fill out the EPA Notification of Hazardous Waste Activity Form, and return it with this packet.
	d. We have gone out-of-business.
	e. We no longer handle hazardous
	waste.
李李	If you check either of these boxes, we will deactivate your EPA ID number and you may no longer use it without renotifying U.S. EPA, Region V.
	f. We have changed our name (but not ownership).
	MDARD INDUSTRIAL CLASSIFICATION (SIC) CODE (See Table I)    3   8   2   2   (2)
(1)_	3 8 2 2 (2) (3) (4)
(1)_ VIII. INST.	3 8 2 2 (2) (3) (4)  ALLATION CONTACT
(1)_ VIII. INST.	3 8 2 2 (2) (3) (4)  ALLATION CONTACT  Name  First Name
(1)_ VIII. INST.	3 8 2 2 (2) (3) (4)  ALLATION CONTACT  Name
(1)_ VIII. INST. Last H E C	3 8 2 2 (2) (3) (4)  ALLATION CONTACT  Name   K
(1)	3 8 2 2 (2) (3) (4)

State Form 192888 Revised 8/89



## FORM F: FACILITY REPORT

WHO MUST COMPLETE FORM F?

Every site that treated, stored (greater than 90 days), or disposed of RCRA hazardous waste under interim status or a final RCRA permit.

(Collected under the authority of Indiana Environmental Management Act)

XVI.	GENERATOR'S NAME (specify)		C	ENERATOR'S EI	PA ID NUMBER
	JOHUNISION CONTROLIS	I N C		I   N   O   O   O   O	5  4  9  5  9  3
XVII.	GENERATOR'S ADDRESS				
	Street Or P.O. Box 1  3  0  2     E  4	AJSIT MONIR	10 E		
	City Or Town G D S H E N				
		ate I  N	Zip C	ode 4 6 5 2 6	
XVIII.	TSD FACILITY'S EPA I.D. NUMBER	INDOO	9 5 4 9	5 9 1.3	
XIX.	COST ESTIMATES FOR FACILITIE	S This information	on is required or	only one copy of FC	DRM F.
	A. COST ESTIMATE FOR FACILITY CLOSE	URE		STIMATE FOR POST ( DRING AND MAINTEN	
	\$     ,   7 , 5 0 0	.00	\$		.       00
XX.	WASTE IDENTIFICATION (See Table	s II & III for correc	t codes for item	s B & C)	
	(A) DESCRIPTION OF WASTE	(B) WASTE FORM CODE	(D) EPA HAZARDOUS	(E) AMOUNT OF	(F) UNIT OF MEASURE (circle one)
	(45 characters or less)	(C) HANDLING CODE*	WASTE CODE(S)	WASTE	(G) DENSITY
	1				PTKMGL
					☐ lbs/gal ☐ sg .
	2				PTKMGL
					☐ !bs/gai ☐ sg
	3				PTKMGL
				<u> </u>	☐ lbs/gal ☐ sg
	4				PTKMGL
					sg
	* See Section XX-C of instructions for wastes har	ndled by more than one	method.	PAGE	OF (OVER)

	(A) DESCRIPTION OF WASTE	(B) WASTE FORM CODE	(D) EPA HAZARDOUS	(E) AMOUNT OF	(F) • MEASUR
<b>620</b>	(45 characters or less)	(C) HANDLING CODE*	WASTE CODE(S)	WASTE	(G) DEN
	5				PTKMG
<b>±</b>					lbs/gal
	6			-	PTKMGL
<i>e</i> ss					lbs/gal
	7		:		PTKMG
eșpă					☐ ibs/gal ☐
	8			"State of the state of the stat	PTKMG
9540					☐ Ibs/gal ☐
1	* See Section XX-C of instructions for wastes han	ndled by more than one	method.		
		÷			-
KI. ( T	COMMENTS				
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ASHLAND CHEMICAL

#### STATE OF INDIANA BIENNIAL REPORT 1989

## FORM G: GENERATOR REPORT

WHO MUST COMPLETE FORM G? Generators of 1,000 kg per month or more of RCRA regulated hazardous was	s
or more than 2.2 lbs of acute hazardous waste. (Collected under the authority of Indiana Environmental Management Act)	
X. GENERATOR'S EPAI.D. NUMBER IN D 0 0 9 5 4 9 5 9 3	
XI. NAME OF FACILITY (Where your hazardous waste was sent). FACILITY'S EPA ID	
A S H L A N D   C H E M I C A L	
XII. ADDRESS OF FACILITY (Where your hazardous waste was sent).	
Street Or P.O. Box 1   8   1   7   I   N   D   I   A   N   A   A   V   E   N   U   E	L
City Or Town   S   O   U   T   H     B   E   N   D	•
State I   N   Zip Code   4   6   6   1   5	
XIII TRANSPORTATION SERVICES USED This information is required on only one copy of FORM G	
List the EPA Identification Numbers and Names for all transporters whose services were used during the year.  AMERICAN ENERGY PRODUCTS INC. IND982642142 SET ENVIRONMENTAL, INC. ILD981957236	
GREAT LAKES ENVIRONMENTAL SERVICES MID087478574	
SOLVENT DISTILLERS INC. MID980684088 SAFFTY-KLEEN CORP. ILD051060408	

### XIV. WASTE IDENTIFICATION (See Tables III & IV for correct codes for items B & C)

IND016621476

(A) DESCRIPTION OF WASTE	(B) SOURCE CODE	(D) EPA HAZARDOUS	(E) AMOUNT OF	(F) UNIT OF MEASURE (circle one)
(45 characters or less)	(C) WASTE FORM CODE	WASTE CODE(S)	WASTE	(G) DENSITY
1 WASTEWATER TREATMENT SLUDGE	LB 1504			<b>Р</b> ТКМ G L
	JA1715	F006	1 1 1 4 5 8 0	1 0 ·sg
2 CAUSTIC SOLUTION WITH METALS	[B]106			PT K M G L
BUT NO CYANIDES	JA1013	D002	 	8.6 ⊠ lbs/gal □ sg
3				PTKMGL
4				PTKMGL
				☐ Ibs/gal ☐ sg

PAGE 1

(A) DESCRIPTION OF WASTE (45 characters or less)	(B) SOURCE COD (C) WASTE FORM CODE	HAZARDOUS	(E) AMOUNT OF WASTE	MEASC (G) DE
5				PTKM
положения в поточно положения в положения				
6				PTKMG
	111			☐ lbs/gal ☐
7				PTKM
8				PTKMC
	-			lbs/gal



### FORM G: GENERATOR REPORT

WHO MUST COMPLETE FORM G?

Generators of 1,000 kg per month or more of RCRA regulated hazardous waste, or more than 2.2 lbs of acute hazardous waste.

(Collected under the authority of Indiana Environmental Management Act)

X. GENERATOR'S EPAI.D. NUMBER I N D C	d 9 5 4 9 5 9	3
XI. NAME OF FACILITY (Where your hazardous waste	was sent).	FACILITY'S EPA ID
CHEM METISERVICES!!!		MII  D  0  9  6  9  6  3  1  9  4
(II. ADDRESS OF FACILITY (Where your hazardous w	aste was sent).	
Street Or P.O. Box 1 8 5 5 0    A L L E 1	n   R  D            1	
City Or Town WYANDOTTE		
State M   I	Zip Co	de 4   8  1  9  2

XIII TRANSPORTATION SERVICES USED This information is required on only one copy of FORM G.

List the EPA Identification Numbers and Names for all transporters whose services were used during the year.

#### XIV. WASTE IDENTIFICATION (See Tables III & IV for correct codes for items B & C)

(A) DESCRIPTION OF WASTE	(B) SOURCE CODE	(D) EPA HAZARDOUS	(E) AMOUNT OF	(F) UNIT OF MEASURE (circle one)
(45 characters or less)	(C) WASTE FORM CODE	WASTE CODE(S)	WASTE	(G) DENSITY
WASTEWATER TREATMENT SLUDGE	B  504		-	<b>O</b> TKMGL
1	[A] 7  5	F006	1 1 1 16101010	1 0 . ☑ lbs/gal □ sg
2 CAUSTIC SOLUTION WITH METALS	B 106			PT K M (G) L
BUT NO CYANIDES	A  0  3	D002	1 1 1 1 3 8 5	8.6 ·sg
3	11			PTKMGL
3				☐ lbs/gai ☐ sg
				PTKMGL
4				

XIV. WASTE IDENTIFICATION (See	Tables III & IV for correct codes for items B & C)
--------------------------------	--

(A) DESCRIPTION OF WASTE	(B) SOURCE CODE	(D) EPA HAZARDOUS	(E) AMOUNT OF	(F) UNIT OF . MEASURE (circle one)
(45 characters or less)	(C) WASTE FORM CODE	WASTE CODE(S)	WASTE	(G) DENSITY
5				PTKMGL
				ibs/gai ☐ sg
6				PTKMGL
7				PTKMGL
8				PTKMĠL
				lbs/gal   sg

					│ │   lbs/gal │ │
8					PT, KM Ġ
ggalannya kananya a sananya sa		111			.
			NO CONTRACTOR OF THE PROPERTY		
COMMENTS					·
				-	-
	-				
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PAGE \_\_\_\_\_ OF \_\_\_\_



## FORM G: GENERATOR REPORT

WHO MUST COMPLETE FORM G?

Generators of 1,000 kg per month or more of RCRA regulated hazardous waste, or more than  $2.2\ lbs$  of acute hazardous waste.

(Collected under the authority of Indiana Environmental Management Act)

Ϋ́					
<u> </u>	GENERATOR'S EPA I.D. NUMBER I	N D 0 0 9	5   4   9   5	9 3	
XI. N	NAME OF FACILITY (Where your hazard	ous waste was ser	nt).	FACILITY'S	S EPA ID
E	N V I R I O N M E N T A L I W A S		O U R C E S	<u>ILIDO 817</u>	1 1 5 7 2 5 1
XII.	ADDRESS OF FACILITY (Where your ha	zardous waste wa	ıs sent).		
	Street Or P.O. Box PIOI IBIOIX		JITIHI IBLRI	OLALDIWIA IYI I I	
	City Or Town C O A L C I TY			111111	-
	<u>Sta</u>	te I L		Code   6   0   4   1   6	
r IIIX	TRANSPORTATION SERVICES USED List the EPA Identification Numbers and Na	This information the same of t	on is required o porters whose s	n only one copy of FC ervices were used dur	RM G. ring the year.
	•			•	:
					•
XIV.	WASTE IDENTIFICATION (See Tables	III & IV for correc	ct codes for item	as B & C)	
•					
	(A) DESCRIPTION OF WASTE	(B) SOURCE CODE	(D) EPA HAZARDOUS	(E) AMOUNT OF	(F) UNIT OF MEASURE (circle one)
	(A) DESCRIPTION OF WASTE (45 characters or less)	(B) SOURCE CODE (C) WASTE FORM CODE		(E) AMOUNT OF WASTE	
•	(45 characters or less)	(C) WASTE FORM	HAZARDOUS WASTE		MEASURE (circle one)  (G) DENSITY  P T K M G L
		(C) WASTE FORM CODE	HAZARDOUS WASTE		MEASURE (circle one)  (G) DENSITY  P T K M G L  8.8.
•	(45 characters or less)	(C) WASTE FORM CODE	HAZARDOUS WASTE CODE(S)	WASTE	MEASURE (circle one)  (G) DENSITY  P T K M G L  8.8.
	(45 characters or less)	(C) WASTE FORM CODE	HAZARDOUS WASTE CODE(S)	WASTE	MEASURE (circle one)  (G) DENSITY  P T K M G L  8.8 ·
•	(45 characters or less)	(C) WASTE FORM CODE	HAZARDOUS WASTE CODE(S)	WASTE	MEASURE (circle one)  (G) DENSITY  PTKMGL  8.8 - sg  Dibs/gai sg  PTKMGL
	(45 characters or less)	(C) WASTE FORM CODE	HAZARDOUS WASTE CODE(S)	WASTE	MEASURE (circle one)  (G) DENSITY  P T K M G L  8.8  Dibs/gal sg  P T K M G L  1bs/gal sg
	(45 characters or less)	(C) WASTE FORM CODE	HAZARDOUS WASTE CODE(S)	WASTE	MEASURE (circle one)  (G) DENSITY  PTKMGL  8.8  Dibs/gal sg  PTKMGL  1bs/gal sg  PTKMGL
	(45 characters or less)	(C) WASTE FORM CODE	HAZARDOUS WASTE CODE(S)	WASTE	MEASURE (circle one)  (G) DENSITY  P T K M G L  8.8  Dibs/gal sg  P T K M G L  lbs/gal sg  P T K M G L  lbs/gal sg

V11 /					
XIV.	WASTE IDENTIFICATION	/C C			
	THE TRANSPORT OF THE PROPERTY	INCP Tables		0 = 00 = 1	C 1
		/DCC TUDIES	TITION TAIL	OF COFFECT CAMES	for ifome R 2. (1)

(A) DESCRIPTION OF WASTE (45 characters or less)	(B) SOURCE CODE	(D) EPA HAZARDOUS	(E) AMOUNT OF	(F) UNIT OF MEASURE (circle one
(43 characters of less)	(C) WASTE FORM	WASTE CODE(S)	WASTE	
				(G) DENSITY
5				PTKMGL
				lbs/gal s
5				PTKMGL
				☐ Ibs/gai ☐ s
7				PTKMGI
				PTKMGL
	1			☐ ibs/gai ☐ s

XV. COMMEN'	rs
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## FORM G: GENERATOR REPORT

WHO MUST COMPLETE FORM G?

Generators of 1,000 kg per month or more of RCRA regulated hazardous waste, or more than  $2.2\ bs$  of acute hazardous waste.

OF 20

(OVER)

(Collected under the authority of Indiana Environmental Management Act)

	(Confected under the addition	Ji ity oi indiana i	III VIII OIIIIICITCAT	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
X	GENERATOR'S EPAI.D. NUMBER I	N   D   O   O   9	5 4 9 5	9   3					
	NAME OF FACILITY (Where your hazardo			FACILITY'S	S EPA ID				
	E N V I R O N M E N T A L W A S	I E CON	ROLEN	C MIIDO57	0   0   2   6   0   2				
XII.	ADDRESS OF FACILITY (Where your haz	ardous waste wa	s sent).						
	Street Or P.O. Box 21711401   P1	R I N C E T	O N I I I						
	City Or Town I N K S T E R	e M   I	Zip (	Code 4 8 1 4 1	-				
XIII	KIII TRANSPORTATION SERVICES USED This information is required on only one copy of FORM G.  List the EPA Identification Numbers and Names for all transporters whose services were used during the year.								
				÷					
XIV	. WASTE IDENTIFICATION (See Tables II	II & IV for correc	t codes for item	s B & C)					
	(A) DESCRIPTION OF WASTE	(B) ŞOURCE CODE	(D) EPA HAZARDOUS	(E) AMOUNT OF	(F) UNIT OF MEASURE (circle one)				
:	(45 characters or less)	(C) WASTE FORM CODE	WASTE CODE(S)	WASTE	(G) DENSITY				
	. UNTREATED PLATING SLUDGE WITH	·  B  506			PTKMGL				
	CYANIDES	A  2 -2	F007		8.8 ·				
			·		PTKMG.L				
	2				☐ lbs/gal ☐ sg				
	3				PTKMGL				
					☐ lbs/gal ☐ sg				
					PTKMGL				
	4				1				

	(A) DESCRIPTION OF WASTE	(B) SOURCE CODE	(D) EPA HAZARDOUS		(F) UNIT O
	(45 characters or less)	(C) WASTE FORM	WASTE CODE(S)	(E) AMOUNT OF WASTE	MEASURE (cire
5	The case data and an				(G) DENSIT
					PTKMG
			B. C.		
6					PTKMG
					ibs/gai
7					PTKM G
				_	
8	·				☐ lbs/gal ☐
	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~				PTKMG
					☐ Ibs/gal ☐
COMMEN	ITS				
	- <del>-</del>				
					-



## FORM G: GENERATOR REPORT

WHO MUST COMPLETE FORM G?

Generators of 1,000 kg per month or more of RCRA regulated hazardous waste, or more than 2.2 lbs of acute hazardous waste.

(Collected under the authority of Indiana Environmental Management Act)	
X. GENERATOR'S EPA I.D. NUMBER I ND 00 9 5 4 9 5 9 3	
XI. NAME OF FACILITY (Where your hazardous waste was sent). FACILITY'S EPA ID	
XII. ADDRESS OF FACILITY (Where your hazardous waste was sent).	
Street Or P.O. Box 6 3 3 E A S T 1 B 8 T H S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1 S T 1	
State   I   I   Zip Code   6   0   4   1   9	
XIII TRANSPORTATION SERVICES USED This information is required on only one copy of FORM G.  List the EPA Identification Numbers and Names for all transporters whose services were used during the year.	

#### XIV. WASTE IDENTIFICATION (See Tables III & IV for correct codes for items B & C)

(A) DESCRIPTION OF WASTE	(B) SOURCE CODE	(D) EPA HAZARDOUS	(E) AMOUNT OF	(F) UNIT OF MEASURE (cirde one)	
(45 characters or less)	(C) WASTE FORM CODE	WASTE CODE(S)	WASTE	(G) DENSITY	
. OIL-WATER EMULSION OR MIXTURE	·  B 205			PT K M G L	
	A 5 4	F001		8.3	
	1 1			PTKMGL	
2				ibs/gal sg	
3				PTKMGL	
4	1 1			PTKMGL	
***************************************		·			

(A) DESCRIPTION OF WASTE (45 characters or less)		(B) SOURCE CODE		(D) EPA HAZARDOUS						(F) UNI	
		(C) WA	STE F	ORM	WA	ADOUS ASTE DE(S)	<sup>(£)</sup>	AMO WAS	UNT OF	-	MEASURE
	<del></del>		ODE								(G) DEN
5		-			<del></del>			·			РТКМ
	Marine Marin							_1_1	1.1	,   _	 ] lbs/gal
6											РТКМ
			Į į	, [				1 1		.   _	   lbs/gal
			<del>                                     </del>								PTK N
			1_1					····		_	
											] lbs/gal
8					· · · · · · · · · · · · · · · · · · ·					_   1	PTKM
	e.		<u></u>	_1		E		1 1		,	lbs/gal
					<u> </u>	**************************************				<u> </u>	i ios/gar
COMMENTS	·		·			·					
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		•									
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## FORM G: GENERATOR REPORT

WHO MUST COMPLETE FORM G?

Generators of 1,000 kg per month or more of RCRA regulated hazardous waste, or more than  $2.2\,\mathrm{lbs}$  of acute hazardous waste.

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(OVER)

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(Collected under the authority of Indiana Environmental Management Act)

<u>X.</u>	GENERATOR'S EPA I.D. NUMBER I	N D 0 0 9	5 4 9 5	9  3						
XI.	NAME OF FACILITY (Where your hazard	lous waste was se	nt).	FACILITY'	S EPA ID					
	S A F E T Y   -   K L E E N   C O	R P		INDO00	7  1  5  4  7  4					
XII.	ADDRESS OF FACILITY (Where your ha	ızardous waste wa	as sent).							
	Street Or P.O. Box 2 2 2 1 7 W E	J SI TI EIRINI IA	A <sub>I</sub> V <sub>I</sub> E <sub>I</sub>							
	City Or Town SOUTH BEND									
	State I   N   Zip Code   4   6   6   2   8									
	XIII TRANSPORTATION SERVICES USED This information is required on only one copy of FORM G.  List the EPA Identification Numbers and Names for all transporters whose services were used during the year.									
· · · · · · · · · · · · · · · · · · ·										
XIV.	WASTE IDENTIFICATION (See Tables	III & IV for correc	t codes for item	s B & C)						
•	(A) DESCRIPTION OF WASTE (45 characters or less)	(B) SOURCE CODE	(D) EPA HAZARDOUS WASTE	(E) AMOUNT OF WASTE	(F) UNIT OF MEASURE (circle one)					
	(45 Characters of ress)	(C) WASTE FORM CODE	CODE(S)		(G) DENSITY					
	WASTE PETROLEUM NAPHTHA	B  204		, ,	(P) T K M G L					
			D001	5   2   5   2   1   1	8.3 Sibs/gal sg					
,	2				PTKMGL					
					☐ Ibs/gal ☐ sg					
	3				PTKMGL					
					☐ Ibs/gal ☐ sg					
		1								
	4				PTKMGL					

## XIV. WASTE IDENTIFICATION (See Tables III & IV for correct codes for items B & C)

(A) DESCRIPTION OF WASTE (45 characters or less)	HAZAF		EPA RDOUS	(E) AMOUNT OF	(F) UNIT OF MEASURE (circle one)	
	(C) WAST			STE DE(S)	WASTE	(G) DENSITY
5						PTKMGL
						ibs/gal sq
6		1				PTKMGL
						☐ Ibs/gal ☐ sg
7			···			PTKMGL
						☐ lbs/gal ☐ sg
8						PTKMGL
						☐ lbs/gal ☐ sg

PAGE \_\_\_\_\_\_\_ OF \_\_\_\_\_\_\_



## FORM G: GENERATOR REPORT

WHO MUST COMPLETE FORM G? (Collected under	Generators of 1,000 kg per month or mor or more than 2.2 lbs of acute hazardous w er the authority of Indiana Environmental M	vaste.
	BER I N D 0 0 9 5 4 9 5 9	13
XI. NAME OF FACILITY (Where yo	ur hazardous waste was sent).	FACILITY'S EPA ID
MILICIHILIGIAINI DILISIPIO		M   I   D   O   O   O   7   2   4   8   3   1
XII. ADDRESS OF FACILITY (When	re your hazardous waste was sent).	
Street Or P.O. Box 4 19 13 14	4 <sub>1</sub> 0 <sub>1</sub>  N <sub>1</sub> .,  I <sub>1</sub> - 9 <sub>1</sub> 4 <sub>1</sub>  S E R V I C	E <sub>   D R                                  </sub>
City Or Town B E L L E V I	L L E	<u> </u>
	State M I Zip Co	de  4  8 1 1 1
XIII TRANSPORTATION SERVICE List the EPA Identification Number	S USED _ This information is required on c rs and Names for all transporters whose serv	only one copy of FORM G. vices were used during the year.

### XIV. WASTE IDENTIFICATION (See Tables III & IV for correct codes for items B & C)

(A) DESCRIPTION OF WASTE	(B) SOURCE CODE	(D) EPA HAZARDOUS	(E) AMOUNT OF	(F) UNIT OF MEASURE (circle one)	
(45 characters or less)	(C) WASTE FORM CODE	WASTE CODE(S)	WASTE	(G) DENSITY	
WASTEWATER TREATMENT SLUDGE	· B   504			<b>P</b> T K M G L	
	A  7 5	F006	1   1   1   8   7   0   0	10. ·sg	
2				PTKMGL	
	111			☐ Ibs/gal ☐ sg	
3				PTKMGL	
	111		<u> </u>	☐ lbs/gal ☐ sg	
4				PTKMGL	
				☐ Ibs/gal ☐ sg	

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## XIV. WASTE IDENTIFICATION (See Tables III & IV for correct codes for items B & C)

(A) DESCRIPTION OF WASTE (45 characters or less)	(B) SOURCE CODE	(D) EPA HAZARDOUS	(E) AMOUNT OF	(F) UNIT OF MEASURE (circle one)
	(C) WASTE FORM CODE	WASTE CODE(S)	WASTE	(G) DENSITY
5	1 1			PTKMGL
6	1 1			PTKMGL
		disease processis de la company de la compan		
7				PTKMGL
				☐ Ibs/gal ☐ sq
8				PTKMGL
				☐ lbs/gal ☐ sq

XV.	COMMENTS
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## FORM G: GENERATOR REPORT

WHO MUST COMPLETE FORM G?

Generators of 1,000 kg per month or more of RCRA regulated hazardous waste, or more than 2.2 lbs of acute hazardous waste.

or more than 2.2 lbs of acute hazardous was (Collected under the authority of Indiana Environmental Mar	
X. GENERATOR'S EPA I.D. NUMBER   I   N D   0 0   9   5   4   9   5   9   3	
XI. NAME OF FACILITY (Where your hazardous waste was sent).	FACILITY'S EPA ID
ENSCO INCITATION	Alrino1619171418111912
XII. ADDRESS OF FACILITY (Where your hazardous waste was sent).	
Street Or P.O. Box AMERICAN OFF	
City Or Town   E   L   D   O   R   A   D   O	<u> </u>
State A   R Zip Code	7   1   7   3   0
XIII TRANSPORTATION SERVICES USED This information is required on onl List the EPA Identification Numbers and Names for all transporters whose services	y one copy of FORM G. es were used during the year.

### XIV. WASTE IDENTIFICATION (See Tables III & IV for correct codes for items B & C)

(A) DESCRIPTION OF WASTE	(B) SOURCE CODE	(D) EPA HAZARDOUS	(E) AMOUNT OF	(F) UNIT OF MEASURE (circle one)
(45 characters or less)	(C) WASTE FORM CODE	WASTE CODE(S)	WASTE	(G) DENSITY
LABORATORY WASTE	[B]001			(PTKMGL
C-Particular and the second and the	A   5   9	D001	1 1 1 1 1 10 13	X lbs/gal  sg
METHYLENE CHLORIDE	JB J204			рткм@ L
	A   3   7	F002	243645	8,3 -
3 CONATHANE	B 204			°РТКМ (©) L
		F003	1 1 1 1 6 1 5	8.3 · sg
4 CONATHANE AND FLOOR DRY	B 204		·	<b>®</b> TKMGL
		F001	1111180	bs/gal sg

COMMENTS  PIKMG	COMMENTS  PTKMG	COMMENTS  PTKMG	7				PTKMG
COMMENTS  The state of the stat	COMMENTS	COMMENTS  The state of the stat	8				□ lbs/gal □ PTKMG
			COMMENTS				Ibs/gal
Fig. 1. Sept. 1. Sept	And the state of t	Fig. 1. Sept. 1. Sept					
Fig. 1. Sept. 1. Sept	And the state of t	Fig. 1. Sept. 1. Sept		•			
Fig. 1. Sept. 1. Sept	And the state of t	Fig. 1. Sept. 1. Sept		•		·	
Fig. 1. Sept. 1. Sept	And the state of t	Fig. 1. Sept. 1. Sept					
The state of the s	The state of the s	The state of the s		esta de la composición del composición de la com			
			The state of the s	en seen oo oo oo oo oo	·	* #	
and the same of th	The state of the s						



### FORM G: GENERATOR REPORT

WHO MUST COMPLETE FORM G?

Generators of 1,000 kg per month or more of RCRA regulated hazardous waste, or more than 2.2 lbs of acute hazardous waste.

(Collected under the authority of Indiana Environmental Management Act)

X. GENERATOR'S EPA I.D. NUMBER I N D 0 0 9 5 4 9 5 XI. NAME OF FACILITY (Where your hazardous waste was sent).	FACILITY'S EPA ID
P E T R O   C H E M   P R O C E S S I N G	MID 9806115121918
XII. ADDRESS OF FACILITY (Where your hazardous waste was sent).	
Street Or P.O. Box 4  2  1     L Y C A S T E	1
City Or Town DETROIT	
State MIT Zip	Code 4 8 2 1 4

XIII TRANSPORTATION SERVICES USED This information is required on only one copy of FORM G.

List the EPA Identification Numbers and Names for all transporters whose services were used during the year.

#### XIV. WASTE IDENTIFICATION (See Tables III & IV for correct codes for items B & C)

(A) DESCRIPTION OF WASTE	(B) SOURCE CODE	(D) EPA HAZARDOUS	(E) AMOUNT OF	(F) UNIT OF MEASURE (circle one)
(45 characters or less)	(C) WASTE FORM CODE	WASTE CODE(S)	WASTE	(G) DENSITY
, WASTE ALCOHOL	·  B 204			PTKM@L
	JA   3   7	D001	 	8.3 · .816 X ibs/gai X sg .
, WASTE METHYL ETHYL KETONE	B 211			PTKM@L
2	A  0  9	F005	1 1 1 2 2 0 10	8.3 · .805   Ibs/gal   sg
WASTE 1,1,1, TRICHLOROETHANE	[B]204			PT K M (G) L
,	A  1   9	F002	1 1 1 12 12 10 10	8.3 1.336 3 lbs/gal 3 sg
WASTE TRICHLOROETHYLENE	B 204			PT K M (6) L
7 200222222222	A 1 9	F002	1   1  3 7 4 0	8.3 · 1.47  X Ibs/gal X sg

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### XIV. WASTE IDENTIFICATION (See Tables III & IV for correct codes for items B & C)

(A) DESCRIPTION OF WASTE	(B) SOURCE CODE	(D) EPA HAZARDOUS	(E) AMOUNT OF	(F) UNIT OF MEASURE (circle one
(45 characters or less)	(C) WASTE FORM CODE	WASTE CODE(S)	WASTE	(G) DENSITY
5 WASTE FREON	B   204			P T K M G L
	A  1  9	F002	1 1 1 1 19 13 15	8.3 ·
6 WASTE DIAZENE	JB J204			PT K M G L
	· 1A 13 14	D001		83 · Sg Ibs/gal sg
7 FLUX AND THINNER	<u>lBl204</u>		Decrease and the second	PT K M @ L
	IA 13 15	D001		8.3 · sg
8	. 1 1			PTKMGL
		·		☐ Ibs/gal ☐ sg

	A  3  5	D001	0   8   8   1	Ibs/gal
8				PTKMG
				ibs/gai 🗌
KV. COMMENTS				
		•		
	- +			
	one of the order o		•	· · · · · · · · · · · · · · · · · · ·
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The second secon	•			,
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#### <u>STATE OF INDIANA</u> BIENNIAL REPORT 1989

## FORM G: GENERATOR REPORT

WHO MUST COMPLETE FORM G? Generators of 1,000 kg per r

Generators of 1,000 kg per month or more of RCRA regulated hazardous waste, or more than 2.2 lbs of acute hazardous waste.

XIII TRANSPORTATION SERVICES USED This information is required on only one copy of FORM G.

List the EPA Identification Numbers and Names for all transporters whose services were used during the year.

### XIV. WASTE IDENTIFICATION (See Tables III & IV for correct codes for items B & C)

				the state of the s
(A) DESCRIPTION OF WASTE	(B) SOURCE CODE	(D) EPA HAZARDOUS	(E) AMOUNT OF	(F) UNIT OF MEASURE (circle one)
(A) DESCRIPTION OF WASTE (45 characters or less)	(C) WASTE FORM CODE	WASTE CODE(S)	WASTE	. (G) DENSITY
UNTREATED PLATING SLUDGE	.  В  506			рткм © L
WITH CYANIDES	A  2  2	F007	1 1 1 1 24 94 71 (	8.8 ·
WIIII OILINAS	1 1			PT K M G L
2			111111	ibs/gal sg
				PTKMGL
3	111		11111	☐ Ibs/gal ☐ sq
Company of the Compan				PTKMGL
4				☐ Ibs/aal ☐ sg

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## XIV.

6			<u>'</u>				William Control of the Control of th		
6				,	1 '			РТК	DENSI M G
6		1 1	1 1 1			<b>—</b>			•
Name of the state	•		1 1	-				☐ lbs/ga	
			+ +	<del></del>				PTK	M G
								☐ lbs/ga	; <u> </u>
7					<u> </u>			PTK	M
					1 1	1 1 1		☐ lbs/ga	
8		1 . 1	1						
						<del></del>		PT K	M G
					***************************************			☐ Ibs/gal	-
COMMENTS									
	<u> </u>			<del></del>		·			
			•					<del></del>	-
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			•		*		:		
	•	•							

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#### STATE OF INDIANA **BIENNIAL REPORT 1989**

## FORM WM:

## WASTE MINIMIZATION FORM

EPAI.D. #: IND009549593 NAME: JOHNSON CONTROLS,

INC

WHO MUST COMPLETE FORM WM?

SECTION A: SECTION R.

All large quantity generators.

	-		DECTION B.		inimization.	ty that result	ed in
A.							
(1)	Did this	site create or expand	a source reduction	program	during 1988 or 1989?	X Yes	N
(2)	Did this	site create or expand	a recycling program	m during	1988 or 1989?	X Yes	No
(3)	Did this during	s site conduct a source 1988 or 1989?	reduction and/or r	ecycling	opportunity assessment	X Yes	□ No
(4	) Do you	plan to develop on-sit	e RCRA-exempt tre	eatment, r	ecycling, or disposal?	X Yes	No
(5)	reducu	ctors have delayed or on activities during I ALLTHAT APPLY)	prevented this site 988 or 1989 ?	from imp	lementing new source	-	
	01	Insufficient capital to i reduction equipment o source reduction pract	r implement new	04	Concern that product qualit as a result of source reduction	y may decline on.	9
·	<u> </u>	Lack of technical infor reduction techniques a specific production pro	pplicable to my	05	Technical limitations of the processes.	production	
	03	Source reduction is not feasible: cost savings management or producted recover the capital inv	in waste ction will not		Permitting burdens.  Other (Specify)	e grani	
(6	recyciii	actors have delayed or ng activities during 19 ALL THAT APPLY)	r prevented this site 988 or 1989 ?	from imp	olementing on-site or off-s	ite feet	. 31
	01	Insufficient capital to recycling equipment o recycling practices.	install new r implement new	07	Technical limitations of proinhibit shipments off site fo	duct processe r recycling.	es
enteridente en la viva	02	Lack of technical info recycling techniques a site's specific producti	applicable to this	08	Technical limitations of proinhibit on-site recycling.	duction proce	esses
	03	Recycling is not econo cost savings in waste production will not re- investment.	management or	09	Permitting burdens inhibit	recycling.	
	04	Concern that product as a result of recycling	quality may decline	10	Lack of permitted off-site re	cycling facili	ties.
	05	Requirements to mani shipments off site for r		11	Unable to identify a market materials.	for recyclable	е
	06	Financial liability pro shipments off site for a	visions inhibit recycling.	12	Other (Specify)		<u> </u>
		***			24.55 1	6	(01100)

	OTE: make copies of				eu.
B. (I) Waste I	Description:	WASTEWATER TREAT	MENT SLUDGE		
(2) EPA Ha	azardous Waste Co	de: [F   0   0   6]			
(3) Source (	Code: A 7	7   5			•
(4) Waste F	orm Code:	B 5 0 4			
(5) a. Rep	ort year Quantity (	Jenerated:	3 9 2 8		
b. Prev	rious year Quantity	Generated:	4 6 1 7	[0]	
c. Unit	of Measure (Circle		K M G	L	
d. Dens	sity: 1 0 •	X lbs/gal		·	
(6) Activity:	Select from Table for the waste desc	V the activities which we ribed in B(1):	ere undertaken to acl	nieve the waste mini	mization resul
	W 13	W 512	W 5 4	W 4 2	
(7) Toxicity:	THE CASE CITE COXICI	that resulted in minimiza ty of the waste or increasons to air, water, or land?	tion of the waste e the quantity or	01 Yes	02 X 1
V1900 22	Recycled in 1989:	N A	in the second of		
(0) Product	on Index: N A	J. L.	engliser i v		
(o) Production					
(10) Source R	eduction Quantity:		6 8 9 0	,	
(10) Source R			6   8   9   0	· · · · · · · · · · · · · · · · · · ·	
(10) Source R			6   8   9   0		
(10) Source R			6   8   9   0		
(10) Source R			6   8   9   0		



### STATE OF INDIANA BIENNIAL REPORT 1989

## FORM WM:

## WASTE MINIMIZATION FORM

NAME: JOHNSON CONTROLS.

WHO MUST	COMPLETE	FORM WM?
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SECTION A:

All large quantity generators.

EPA I.D. #: \_

WITO MOST COMT BETTE TO THE	SECTION B:	Generators that engaged in an activity waste minimization.	ty that resulted in
Α.	***************************************		•
(1) Did this site create or expan	d a source reduction	program during 1988 or 1989?	X Yes N
(2) Did this site create or expan	d a recycling program	m during 1988 or 1989?	X Yes N
(3) Did this site conduct a sour during 1988 or 1989?	ce reduction and/or r	ecycling opportunity assessment	X Yes N
	site RCRA-exempt tre	eatment, recycling, or disposal?	X Yes N
(5) What factors have delayed reduction activities during (CHECK ALL THAT APPLY)	or prevented this site 1988 or 1989?	from implementing new source	-
01 Insufficient capital t reduction equipmen source reduction pra	t or implement new	04 Concern that product quali as a result of source reduct	ion.
02 Lack of technical in reduction technique specific production p	s applicable to my	05 Technical limitations of the processes.	e production
03 Source reduction is feasible: cost saving management or pro recover the capital is	not economically gs in waste duction will not	06 Permitting burdens.  07 Other (Specify)	
(6) What factors have delayed recycling activities during (CHECK ALL THAT APPLY)	l or prevented this sit g 1988 or 1989?	e from implementing on-site or off	-site
01 Insufficient capital recycling equipment recycling practices	nt or implement new	07 Technical limitations of p inhibit shipments off site	for recycling.
02 Lack of technical i recycling techniqu site's specific prod	es applicable to this	08 Technical limitations of p inhibit on-site recycling.	
03 Recycling is not ed		09 Permitting burdens inhib	
	uct quality may decline lling.		•
05 Requirements to n shipments off site	nanifest wastes inhibit	11 Unable to identify a mar materials.	ket for recyclable
06 Financial liability shipments off site	provisions inhibit	12 Other (Specify)	
:		PAGE3_	OF <u>6</u> (OVE

NOTE: make copies of this form and fill out Section B for each ha	azardous waste minimized.
B. (1) Waste Description: CAUSTIC SOLUTION WITH METALS BUT	
(2) EPA Hazardous Waste Code: D 0 0 2	
(3) Source Code: [A [0]3]	
(4) Waste Form Code: B 1 0 6	
(5) a. Report year Quantity Generated:	5 5
b. Previous year Quantity Conserved	6 5
c. Unit of Measure (Circle one): P T K M G	) <u>L</u>
d. Density: 10 • X lbs/gal sg	
(6) Activity: Select from Table V the activities which were undertaken to a for the waste described in B(1):	schieve the waste minimization regula-
W 2 2 W 4 2	W   5   1   W   6   3
(7) Toxicity: Did the activities that resulted in minimization of the waste increase the toxicity of the waste or increase the quantity or toxicity of emissions to air, water, or land?	01 Yes 02 X No
(8) Quantity Recycled in 1989:	
(10) Source Reduction Quantity:	
(11) Comments:	



### STATE OF INDIANA **BIENNIAL REPORT 1989**

## FORM WM:

## WASTE MINIMIZATION FORM

WHO MUST COMPLETE FORM WM?

SECTION A: SECTION B: All large quantity generators.

Generators that engaged in an activity that resulted in

EPA I.D. #: <u>IND009549593</u> NAME: JOHNSON CONTROLS,

waste minimization.

Α.				-				
	(1)	Did t	his:	site create or expand a source reduction	program	during 1988 or 1989?	X Yes	:
	(2)	Did t	his	site create or expand a recycling progra	m during	1988 or 1989?	X Yes	1
·	(3)	Did t	his ng l	site conduct a source reduction and/or r 988 or 1989?	ecycling	opportunity assessment	X Yes	1
	(4)	<b>Do</b> y	ou j	olan to develop on-site RCRA-exempt tre	eatment,	recycling, or disposal?	X Yes	1
	(5)	redu	ctio	etors have delayed or prevented this site on activities during 1988 or 1989 ? LLL THAT APPLY)	from imp	olementing new source	-	
				Insufficient capital to install new source reduction equipment or implement new source reduction practices.	04	Concern that product qualit as a result of source reducti	ty may decline on.	<b>.</b> .
				Lack of technical information on source reduction techniques applicable to my specific production processes.	05	Technical limitations of the processes.	production	
				Source reduction is not economically feasible: cost savings in waste management or production will not	06	Permitting burdens.		
				recover the capital investment.	<b>07</b>	Other (Specify)		
	(6)	recy	clin	ctors have delayed or prevented this site og activities during 1988 or 1989 ? ALL THAT APPLY)	e from im	plementing on-site or off-s	ite	
			01	Insufficient capital to install new recycling equipment or implement new recycling practices.	07	Technical limitations of prinhibit shipments off site for	oduct processe or recycling.	es
	** **	_ 🔲	02	Lack of technical information on recycling techniques applicable to this site's specific production processes.	08	Technical limitations of proinhibit on-site recycling.	oduction proce	esses
			03	Recycling is not economically feasible: cost savings in waste management or production will not recover the capital investment.	09	Permitting burdens inhibit	recycling.	
			04	Concern that product quality may decline as a result of recycling.	10	Lack of permitted off-site r	ecycling facili	ties.
			05	Requirements to manifest wastes inhibit shipments off site for recycling.	11	Unable to identify a marke materials.	t for recyclabl	e
			06	Financial liability provisions inhibit shipments off site for recycling.	12	Other (Specify)		
				,		page 5	os 6	(OUDD

	NOTE: make copies of this form and fill out Section B for each hazardous waste minimized.
В.	and the fact of th
(1) Was	
*****	METHYLENE CHLORIDE
(2) EPA	Hazand
	Hazardous Waste Code: F 0 0 2
(3) Sour	
W South	ce Code: A 3 7
(d) 337.	
(T) Waste	e Form Code: B 2 0 4
(5)	
(3) a. R	eport year Quantity Generated:
b. Pr	evious year Quantity Generated:
•	Generated: 11615101
c. Un	it of Measure (Circle one): P T V
d. Der	
201	sty: p. 13 sg
(6) Activity	
(o) Activity	Select from Table V the activities
	Select from Table V the activities which were undertaken to achieve the waste minimization res
	W 6 0
(19) 199	
(7) Toxicity:	Did the activities that resulted in minimization of the waste toxicity of amicrosic toxi
āra	increase the toxicity of the waste or increase the quantity or  toxicity of emissions to air, water, or land?
	toxicity of emissions to air, water, or land?
	States to describe the control of th
(8) Quantity	Recycled in 1989:
	necycled in 1989:
(9) Production	In Indon
सिंहिंदु १५	• L
, - ource ne	eduction Quantity:
(11) Comments	
-, -, comments	
1	PURCHAGED
	PURCHASED BLU-SURF BURN-OFF OVEN FOR RACK AND PARTS STRIPPING.
	ELIMINATED METHYLENE CHIOPIDE
1	ELIMINATED METHYLENE CHLORIDE FOR RACK STRIPPING.
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PAGE 6

OF \_6

## SEPA

### United States Environmental Protection Agency Washington, DC 20460

Please refer to the Instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recognity Arth.

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X. Description of Hazardous Wastes (continued from front)											
A. Hazardous Wastes from Nonspecific Sources. Enter the four-digital											
from nonspecific sources your installation handles. Use additional	sheets if necessary.										
1 2 3	4 5 6										
F         O         O         1         F         O         O         2         F         O         O         3	F 0 0 5 F 0 0 6 F 0 0 7										
7   8   9	10 11 12										
B. Hazardous Wastes from Specific Sources. Enter the four-digit no	umber from 40 CER Part 261 32 for each listed bazardaye was a										
from specific sources your installation handles. Use additional sheets it	f necessary.										
13 14 15	16 17 18										
19 20 21	22 23 24										
25 26 27											
	28 29 30										
C. Commercial Chemical Product Hazardous Wastes. Enter the four-digit number 40 CFR Part 261.33 for each chemical substance your installation handles which may be hazardous waste. Use additional sheets if necessary.											
31 32 33	34 35 36										
P 1 0 6 P 1 2 1 U 0 0 2	<u>U 0 3 1   U 0 8 0   U 1 5 4   </u>										
6. 37 (1. 1) 1 (1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	1 - min 40 - 1 - 1 41   42										
U 2 2 0 U 2 2 6 U 2 2 7	U 2 2 8 U 2 3 9										
43 44 45											
	45 47 48										
D. Listed Infectious Wastes. Enter the four-digit number 40 CFR Pa or medical and research laboratories your installation handles. Use ad	rt 261.34 for each hazardous waste from hospitals, veterinary hospitals, iditional sheets if necessary										
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50 51	52 100 53 100 54 100 54										
E. Characteristics of Nonlisted Hazardous Wastes, Mark 'X' in the wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24)	boxes corresponding to the characteristics of nonlisted hazardous										
(D001) (D002)	3. Reactive 4. Toxic (D003) (D000)										
XI. Certification											
Cortify under nonetheral law that I have no recibious											
and all-attached documents, and that hased on my	nined and am familiar with the information submitted in this inquiry of those individuals immediately responsible for										
i optaining the information, I believe that the submitted	information is true, accurate, and complete. I am aware										
I that there are significant penalties for submitting t	faise information, including the possibility of fine and										
imprisonment.											
Signature Name and Official	Title (type or print) Date Signed										
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comercy the local EMERY LEE											
Estimated burden: Public reporting burden for this collection	on of information is estimated to be 3 hours, including time for										
I reviewing instructions, searching existing data sources, da	thering and maintaining the data needed, and completing and larding the burden estimate or any other aspect of this collection										
I or information, including suggestions for reducing this	burden, to Chief, information Policy Branch PM-222 U.S.										
Environmental Protection Agency, 401 M St., S.W., Washing Affairs, Office of Management and Budget Washington, D.	ton, D.C. 20460; and to the Office of Information and Regulatory										

Affairs, Office of Management and Budget, Washington, D.C. 20503.

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Required under authority of Act 64, PA 1979, as amended and Act 136, PA 1969.

Failure to file is punishable under section 299.548 MCL or Section 10 of Act 136, P.A. 1969.

69	2	or type			Form Appro	ved. OMB No.	. 2050-0039	9 Expires 9-30-91
		WASTE MANIFEST IN D 0 0 9 5		Manifest Document No. 5 17 141 11 7	2. Page 1 of 1			shaded areas by Federal
		Generator's Name and Mailing Address ohnson Controls			A. State N	fanifest Do	cument	Number
		302 E. Monroe St.			B. State C	ienerator's	1D 👙	
		oshen, IN 46526 219-533-2111 Generator's Phone ( ) 6.	US EPA ID	Number		ransporter		
	G	reat Lakes Environmental Services MI	D 0 8 7 4	718151714	l	orter's Pho	18.1	3-758-0400
	7	Transporter 2 Company Name 8.	US EPA ID	Number		ransporter orter's Pho		
	9.	Designated Facility Name and Site Address 10.	US EPA ID	Number	<u> </u>	acility's II		
		etro Chem Processing			E Coollin	y's Phone		
Ц		21 Lycaste etroit, MI 48214 <u>  M T</u>	D 9 8 0 6	1151기이 8	Park Care	7 3 - 824-	-5840	
1	11.	. US DOT Description (including Proper-Shipping Name, Haza HM ID NUMBER).	ard Class, and	12.Conta	iners	13. Total	14. 1. Unit	Waste No.
G E	a.	HM ID NOMBEH).	<u> </u>	No.	Туре (	Quantity	Wt∕Val	N/H
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A	b.	Flammable Liquid UN1993 (EPA Ignita	ability)			LIGA 45	GI	EL 0 0 2 H
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	J.	Additional Descriptions for Materials Listed Above		Fire Sain		ng Codes i	for Waste	s al Al
	8	a. Freon/Oil/Water #U-11002			Listed	Above		b/ //
	Ţ	AND BAN FORM ATTACHED	42.57	Electrical in				c/ 왕/
	2	Special Handling Instructions and Additional Information		で大学さる。			4 544	d/  刻 / 零
	豪	Special Hariding Institutions and Additional Information				7 7 4 1 7 4	است. د	
	16	GENERATOR'S CERTIFICATION: I hereby declare that the contents of this proper shipping name and are classified packed marked and labeled, and	consignment are fu are in all respects	ully and accurately in proper condition	described ab	ove by t by highway	- - -	
ľ	٠	gaccording to applicable international and national government regulations. If I am a large quantity generator, I certify that I have a program in plac	e to reduce the vo	olume and toxicity	of waste ge	nerated to th	ne degree !	have determined
١.		to be economically practicable and that I have selected the practicable present and future threat to human health and the environment; OR; generation and select the best waste management method that is	if I am a small qua	intity generator, I	have made a	a good faith	effort to m	inimize my waste
	L	Printed/Typed Name //	Signature					Date onth Day Year
A		EMERY LEE HECK	Emer	y Lu	deck	2	• •	040/190
Ţ	Ī	7. Transporter 1 'Acknowledgement of Receipt of Materials	0					Date
ANS	-	Printed/Typed Name Timmy S. Simms	Signature	immed is	٤٤	Simo		DLOO 190
POR	口	8. Transporter 2 Acknowledgement or Receipt of Materials	Signature	7				Date
¥ R		Printed/Typed Name	Signature				Ĺ	Ionth Day Year
	•	9. Discrepancy Indication Space			-			
F A C				•				
	L	O, Facility Owner or Operator: Certification of receipt of hazard	ous materials co	overed by this n	nanifest exi	cept as not	ed in	
Y	L	Item 19.				· · · • ·	Γ	Date
		Printed/Typed Name	Signature			٠.	. <i>N</i> L	fonth Day Year
E	- <u> </u> -A	Form 8700-22 (Rev. 9/88) c	danguisi Sanguisi	N				PR 5110 Rev. 9/88

techinal sessi Notes Ame

# great lakes environmental services, inc. (313) 758-0400

				SERVI	CE REC	EIPT AN	ND LOG	Jo	ob No. 30-5	727	
Customer	Name 🗎	<u> </u>	بصر ب	t) 11 - 32	- Lice	Vin Mi		D	ate <u>0-1-</u>	-90	
Address		oshi	n d	<u></u>				P.	o. No		
	<del></del> .			·					uborder/Release		
Job Locati	ion										
	TERMS: No	et 30 days. <i>I</i>	A Service C	harge is cha	arged on all a	accounts pa	st due at cu	rrent ra	tes. (\$2.00 Mini	mum Charg	e) .
					EQUIP	MENT					
TRUCK NUMBER	TYPE	START YARD TIME (AM) or PM	ARRIVAL JOB TIME AMOOF PM	DEPARTURE JOB TIME AM or PM	ARRIVAL DISPOSAL TIME (AWPM)	DEPARTURE DISPOSAL TIME (AM/PM)	RETURN YARD TIME AM or PM	STRAIGI TIME HOURS	TIME	DOUBLE TIME HOURS	TOTAL HOURS
38	vac.	4:30	8:45	10:45							
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. ,	NAME		START YARD TIME AM or PM	ARRIVAL LOB TIME AM or PM	DEPARTURE LOB TIME AM or PM	RETURN YARD TIME AM or PM	STRAIGHT TIME HOURS	1½ TIME HOURS	1	AIR TIME HOURS	TOTAL HOURS
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		Customers	Signature				()	ø	perator's Signature		

## LAND DISPOSAL RESTRICTED AND PROHIBITED HASTE NOTICE AND CERTIFICATION

TO: Petro-chem Processing, Inc. 515 Lycaste Detroit, MI 48214 MID 980615298

This shipment (Manifest Number: MI-175747) contains hazardous waste or treatment residues of a hazardous waste restricted or prohibited from land disposal under 40 CFR Part 268 Subpart C or Section 3004(d) of the federal Resource Conservation and Recovery Act of 1976, as amended, 42 USC 6901 et seg ("RCRA"), as indicated by an "X" below. This notification is included with the shipment as required by 40 CFR 268.7.

1. The following wastes are restricted from land disposal unless the concentration of their hazardous constituents is below the level specified in the associated treatment standard. The treatment standard may not be exceeded by the extract of a waste or an extract of a waste treatment residual. Concentrations must be determined using the test method in 40 CFR Part 268, Appendix A. 40 CFR 268.41(a). When wastes with different treatment standards for any constituent are combined for purposes of treatment, the treatment residue must meet the lowest treatment standard for that constituent 40 CFR 268.41(b).

1A. This shipment contains the following restricted F-solvent hazardous waste:

	Hastewater	Non-Wastewater
Waste and Constituent Acetone (F003) n-Butyl Alcohol (F003) Carbon disulfide (F005) Carbon Tetrachloride (F001) Chlorobenzene (F002) Cresols (and cresylic acid) (F004)	Wastewater Treatment Standard (mg/1) 0.05 5.0 1.05 0.05 0.15 2.82	Non-Wastewater Treatment Standard (mg/1) 0.59 5.00 4.81 0.96 0.05 0.75
Cyclohexanone (F003)  1, 2-Dichlorobenzene (F002)  Ethyl acetate (F003)  Ethyl benzene (F003)  Ethyl ether (F003)  Isobutanol (F005)  Methanol (F003)	0.125 0.65 0.05 0.05 0.05 5.0	0.75 0.125 0.75 0.053 0.75 5.0

Methylene chloride			ř		-
(pharmaceutical)Methylene chloride	See S	Section	<b>2</b> A		0.96
(FOO1, FOO2) (non-pharmaceutical) Methyl ethyl ketone	-	0.20			0.96
(FOO5) Methyl isobutyl ketone		0.05			0.75
(F003) Nitrobenzene (F004) Pyridine (F005) Tetrachloroethylene		0.05 0.66 1.12		-	0.33 0.125 0.33
(F001, F002) Toluene (F005) 1,1,1-Trichloroethane		0.079 1.12			0.05 0.33
(F001, F002) 1,1,2-Trichloro-1,2,2-	·	1.05			0.41
Trifluoroethane (FOO2)Trichloroethylene		1.05			0.96
(FOO1, FOO2)Trichlorofluoromethane		0.062			0.091
(F002) Xylene (F003)		0.05 0.05			0.96 0.15 -
Source: 40 CFR 268.41(a); Table CC	HE				
1B. This shipment contains waste:	the fo	llowing	K-nonwa:	stewate	r hazardous
K051, and K052 nonwastewat	ers			(mg/1)	
Arsenic Chromium (Total) Nickel Selenium				0.004 1.7 0.048 0.025	
KO86 nonwastewaters (Solve Washes Subcategory)	ent —			(mg/1)	•
Chromium (Total) Lead	·			0.094 0.37	

11. I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that:

the waste does not comply with the treatment standards specified in 40 CFR Part 268 Subpart D or an applicable prohibition set forth in 40 CFR 268.32 or RCRA Section 3004(d).

Part 268 Subpart D and all applicable prohibitions set forth in 40 CFR 268.32 or RCRA Section 3004(d).

I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment.

Johnson Controls June NAME OF GENERATOR
NAME OF GENERATOR
IND009549593
GENERATOR IDENTIFICATION NUMBER
_ Convert Leele
SIGNATURE OF GENERATOR'S AUTHORIZED REPRESENTATIVE
TITLE OF GENERATOR'S AUTHORIZED REPRESENTATIVE
TITLE OF GENERATOR'S AUTHORIZED REPRESENTATIVE
June 1,1990
// PATE

C3048I

SAFETY-KLEEN CORP.

P.O. BOX 19276

SPRINGFIELD, ILLINOIS 62794-9276 (217) 782-676

NOTE:	FORM DESINGED TO PRINT	8 LINES PER INCH	State Form LPC 82 8/81 EPA Form 8700-		AND SI	PECIAL WASTE.	
U	NIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID N	io. Manifest Doc		Page 1 In	wed. OMB No. 2050-0039 Enformation in the shaded in not required by Federa i required by fillinois law.	areas
2 No.	JOHNSON CONTROLS I 1302 EAST MONROE 8 GOSHET Phili (46526) Transporter 1 Company Marie	RC.	3. US EPA ID Number			ion and s TA: TA:	
7.	Transporter 2 Company Name	- INC	77 NOS 1 05 7736 3. US EPA ID Number	ξΕ.	Minole Transpo	der die Bereitste	
E	Designed Facility Name and Site SAFETY-KLEEN CORP 633 EAST 188th ST DOLTON, IL 60419	Address	ILD980613913	G.	Illness PR Facility a Land Eacility a Phone		
11 <sub>D</sub>	US DOT Description (Including Pri		ss and ID Number)	12. Container	s 13. Total	14. Unit	
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GENERATOR/SHIPPER	•				0095 495 93
Company			II GEN		18039551
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Phone <u>319-533-3111</u>	Contact_	LEE YE	TULSON	PO#	249 2,93
TREATMENT/DISPOSAL FACILITY				PU#_	<u> </u>
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S PROPER SHIPPING NAME OR		HAZARD C	LASS	UN or NA NUMBER	USEPA HAZ. I.D.#
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This is to certify that the above name and are in proper condition for transportation; and I understand that I and Signature	n responsible for an	y costs incurred	due to non-	ions of the D compliance o	
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Comments From Driver

#### NOTICE OF LAND DISPOSAL RESTRICTION OF WASTE

EPA ID No.: ILD980613913

CONTROL # 0047263

		•	
Inder manifest number TL 502 H47/) line interestor noted below is shipping to you a was 268. In accordance with 40 CFR 268.7, the great stricted and the EPA waste type and the approximation of the second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second second s	enerator beceby or	Ovides notice that	the issent in
CFR 268.41) are as follows:	opiiale dealment s	Gandaros (Trom Labi	e CCVVE of 4
PA Waste Type: F001 (Enter F001			
real value Type: FOOT (Enter FOOT)	F002, F003, F004		
		STANDARDS (mg/1	21
001-F005 Solvents	Wastewater w/Solvents	All Other Solvent Waste	Check All That Apply
Acetone	0.05	0.59	i.
-Butyl alcohol	5.0	5.0	
arbon disulfide	1.05	4.81	
arbon tetrachloride	. 05	.96	
hlorobenzene	. 15	. 05	
resols (and cresylic acid)	2.82	. 75	
yclohexanone	. 125	. 75	
,2-dichlorobenzene	. 68	. 125	
thyl acetate	: .05	. 75	***************************************
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thyl ether	. 05	. 75	
sobutanol	, 5.0	5.0	
Methanol :	. 25	~. 7 <b>5</b>	***************************************
Methylene chloride	. 20	, .96	
Methylene chloride(from pharmaceutical industry)	12.7	` . 96	
Methyl ethyl ketone	0.05	0.75	
Methyl isobutyl ketone	0.05	0.33	
litrobenzene	0.66	0.125	
yridine	1.12	0.33	
etrachioroethylene Oluene	0.079	0.05	
1,1,1-Trichloroethane	1.12	0.33	
.1,2-Trichloro = 1,2,2 trifluroethane	1.05	0.41	X
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richlorofluoromethane	0.062	0.091	
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· ·	0.05	0.15	
Supposition Alaman (IQUA)OOM COMMISSION		EPA	
Senerator Name: JOHNSON CONTROLS	-3	ID: <u>INDO09549</u>	593
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S-K Sample Number:

068343

TO:

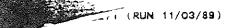
### NOTICE OF LAND DISPOSAL RESTRICTION OF WASTE

TO:	SAFETY-KLEEN CORP STATE HWY 148 NEWCASTLE KY 40050	EPA ID No.:	KYD053348108	<b>*</b> ***********************************
			•	
genera 268. restric	manifest number 12 502 4470 line nator noted below is shipping to you a waste. In accordance with 40 CFR 268.7, the geoted and the EPA waste type and the appropress (268.41) are as follows:	perator bornby as	Z	TO OTH Fait
EPA \	Waste Type: F001 (Enter F001, F	002, F003, F004	or F005)	
		TREATMENT S	STANDARDS (mg/1)	•
		Wastewater	All Other	Check All
F001	F005 Salvents	w/Solvents	Solvent Waste	That Apply
Aceto	ne ·	0.05	0.59	
	yl alcohol	5.0	5.0	
Carbo	n disulfide	1,05	4.81	<del></del>
	n tetrachloride	.05	.96	
	benzene	. 15	.05	-
	ls (and cresylic acid)	2.82	.75	<del></del>
Cyclol	nexanone	. 125	.75	
	lichlorobenzene	. 68	. 125	
_ ′	acetate	.05	. 75	Military and
	penzena	. 05	.053	****
Ethyl		. 05	. 75	
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Methai		. 25	75	-
Methy	lene chloride	.20	.96	
Methy	lene chloride(from pharmaceutical industry)	12.7	.96	
	ethyl ketone	0.05	0.75	
	isobutyl ketone	0.05	0.33	
Pyridir	enzene	0.66	0.125	
	ne hioroethylene	1.12	0.33	-
Toluer		0.079	0.05	
	-Trichloroethane	1.12	0.33	
1.1.2-	-Trichloro - 1,2,2 trifluroethane	1.05	0.41	<u> </u>
Trichle	proethylene	1.05	0.96	*
Trichlo	profluoromethane	0.062 0.05	0.091	
Xylene		0.05	0.96 0.15	<del></del>
Genera	ator Name: <u>JOHNSON CONTROLS</u>		EPA ID: <u>INDO095495</u>	93
Genera	ator Representative Signature: Energy	Leidech		
Name	& Title of Representative: EARERY LE	EHECK M	AHU FICTUR	ING EMPINEER
		(print or ty)	Pe)	/——/

CONTROL #

S-K Sample Number:

068343



#### PREQUALIFICATION EVALUATION CUSTOMER SURVEY



PAGE 1 OF 3

COMPLETE: 11/03/89 CONTROL#: 0047263-4 SAMPLE# : 068343

ACCEPT

NO ATTACHMENT

IN BULK

PROCESS: WASTE FROM MACHINE

**FLUID RECOVERY** 

RECOVERY FLUID

CUSTOMER INFORMATION:

JOHNSON CONTROLS 1302 E. MONROE ST.

GOSHEN

IN 46526

ATTN: LOIS WANGLER

BRANCH: 508201 MARK ZIMMERMAN COUNTY: ELKHART :

NATURE OF BUSINESS: MFG OF CONTROLS

FEDERAL EPA ID: INDO09549593 STATE EPA:

MANIFEST ADDRESS IS FACILITY MANIFEST TO SAFETY-KLEEN

MATERIAL: HYD. OIL/COOLANTS/WATER

VOLUME: 1500 GALS PER WEEK VOLUME ON HAND: 1500

SHIPPING FREQUENCY: 1 WK 2000 IN BULK STORAGE CAPACITY:

VISCOSITY: COLOR: GREEN-REDDISH LAYERS: THREE PHYSICAL STATE: LIQUID LOW MATERIAL COMPOSITION(VOL%): CODE MIN TYPICAL MAX 0.0 10.0 OIL, PETROLEUM 0 C 0.0 COOLANT 10.0 b WATER 0.0 80.0

RESTRICTED SUBSTANCES: NONE

D.O.T. HAZARDOUS MATERIAL: CUSTOMER REQUEST ASSISTANCE

EPA HAZARDOUS WASTE: CUSTOMER REQUEST ASSISTANCE

P.O. NO: BRANCH: 508201 DATE: 10/07/89

TYPE OF SAMPLE: TANK NUMBER OF DRUMS SAMPLED: TAKEN BY: SALESREP TITLE: PRODUCTION SUPERVISOR CONTACT: LOIS WANGLER PHONE: 219-533-2111

: TURN OVER TO OIL SVC IF OK COMMENTS EXT. 274

CORPORATE REVIEWS: DISPOSITION REVIEWER DATE PRICING CODE: F2

TECHNICAL: ACCEPT EJ€ 11/01/89 HANDLING CODES: SO2/T50

ACCEPT REGULATORY: CAP 11/01/89

11/01/89 OPERATING: JWH

APPROVED FACILITIES:

(654) SAFETY-KLEEN CORP (658) SAFETY-KLEEN CORP

STATE HWY 146 633 EAST 138TH ST

NEWCASTLE KY 40050 DOLTON IL 60419

FED EPA#: ILD980613913 KY0053348108

STATE EPA#: 0310690006 TELEPHONE: 312/849-4850 IL. AUTH#: 000162 502/845-2453

APPROVED 0001053 DRUM OR BULK

DOT-EPA RQ WASTE COMBUSTIBLE LIQUID N.O.S.

DESC. NA1993 (EPA FOO1)

COMMENTS: OK FOR HAZARDOUS WASTE WATER. FRS CAT II. NOT OK FOR

OIL SVCS. LAB FOUND III IN SAMPLE.

THIS SERVES AS NOTICE PER, 40CFR284.12(B), THAT THE FACILITY(IES) NOTED ABOVE HAS THE APPROPRIATE PERMITS AND IS WILLING TO RECEIVE THE MATERIAL DESCRIBED.

# SAFETY KLEEN CORP. PREQUALIFICATION EVALUATION MATERIAL ANALYSIS

COMPLETE: 11/05/CONTROL#: 0047263-4 SAMPLE#: 068343

ACCEPT

FLUID RECOVERY

NO ATTACHMENT

** F	LUID,	RECO	VERY	f **			
ENERAL ANALYSIS OF TOTAL SAMPLE							
COLOR : MULTI WATER CONTENT : 76.3 NON-VOLATILE RESIDUE: 14.5 FLAMMABILITY : NO FLASH FLAMMABILITY : NO FLASH PH : DIRECT RADIOACTIVITY : NONE DETE	WT% DESC AT 142 F H 102 F BY MET	BY SETAF	LASH				
UEL EVALUATION OF TOTAL SAMPLE		**** * ********************************					
CHLORINE CL: 0.1	BTU/LB WT% WT%		ASH UF BROMIN SULFUF		BR: < 0	.1 WT% .1 WT% .1 WT%	
ETALS CONTENT OF TOTAL SAMPLE (PPM): DIG		BY: ICP					
	OPPER ITANIUM	CU: TI:		9 IRON 1 ZINC		FE: . ZN:	69 60
SILICON SI: 100 A	LUMINUM	AL:		5 BORON		B :	13
	ODIUM	NA:		71 CALCI		CA:	36
	HOSPHORUS ERYLLIUM		<	22 SILVE 1 CADMI	R (DQ11) UM (DOO6)		1
CHROMIUM (DOO7) CR: < 1 M	ERCURY (					K : <	İ
	ICKEL		<	1 ANTIM		SB: <	1
SELENIUM (DO10) SE: < 1 T	IN	SN:	< .	1 THALL	IUM	TL: <	1
ENERAL COMPOSITION:				GEN	ERAL COMPO	· VA MOTTS	
ENERAL COMPOSITION.	SPEC		VISCOSI'	TY	CENTRIFUGE	APPEARANC	E TOTAL
AQUEOUS PHASE (FREE WATER)	GRAV	TITY (C	ENTIPOI:	C = \	(110101)	(VOL%)	(WT %
AQUEOUS PHASE (FREE WATER)  DRGANIC PHASE (FEEDSTOCK)					80.0	84.0	84.
BOTTOM SLUDGE (SEMISOLIDS)					20.0	16.0 0.0	16. O.
BOTTOM SOLID (SETTLED SOLIDS)					0.0	0.0	0.0
t TOTAL		970 <	50	CPS	100.0	100.0	. 100.0
PECIFIC COMPOSITION OF TOTAL SAMPLE		•		COMPOSITIO	N OF:	TOTAL	TOTAL
						SAMPLE (WT%)	SAMPLI (WT%
WATER CONTENT NON-VOLATILE RESIDUE						., 76.3	76.3
NON-VOLATILE RESIDUE VOLATILE ORGANICS BY DIFFERENCE	DESC	RIPTION:	014	• • • • • • • • • • • • • • • • • • • •		14.5	14.5
VOLATILE ORGANICS BY DIFFERENCE	-			• • • • • • • • • • • • •		9,2	9.2
TOTAL						100.0	100.0
OLATILE ORGANIC COMPOSITION OF ORGANIC F			TOGRAPH	Y		· .	······································
SAMPLE PREPARATION METHODS: CS2 DETECTION METHODS : FIC							
	, 0,,,,		COMPOS	ITION OF:		VOLATILE	
OMPOUND NAME			CODE	CAS NUMBER		ORGANICS	SAMPL (WT%
EDIUM ALIPHATIC HYDROCARBONS (C9-C13)			MHC	0-75-9		(WT%) 44.0	4.0
RICHLOROETHANE, 1,1,1-		4	111	71-55-6	28.8	28.8	2.6
EAVY ALIPHATIC HYDROCARBONS (C14-C20)			HHC	0-34-0	27.2	27.2	2.5
OTAL					100.0	100.0	9.2
UMMARY OF VOLATILE ORGANIC COMPOSITION E ALCOHOLS	Y COMPOUN			WT%: CARBONS	71,2		
AROMATIC HYDROCARBONS	0.0	CHLORINA			28.8		
ESTERS		ETHERS			0.0	)	
GLYCOL ETHERS KETONES	0.0	INHIBITO NITROGEN		INDS	0.0		
. , <del>•</del>							
PECIFIC DRGANIC COMPOSITION							
PECIFIC ORGANIC COMPOSITION POLYCHLORINATED BIPHENYLS (PCBS	5): NONE (	DETECTED <	:				
			•				

### NOTICE OF LAND DISPOSAL RESTRICTION OF WASTE

TO: SAFETY-KLEEN CORP 633 EAST 138TH ST DOLTON IL 60419

EPA ID No.: ILD980613913

Under manifest number line r generator noted below is shipping to you a was	number(er	nter 11a, 11b, 11c, le restricted under	or 11d) the 40 CRF Part
generator noted below is shipping to you a was 268. In accordance with 40 CFR 268.7, the generative and the EPA waste type and the appro CFR 268.41) are as follows:	enerator hereby Dro	ovides notice that t	ne vvaste is
EPA Waste Type: F001 (Enter F001,	F002, F003, F004	or F005)	•
	TREATMENT :	STANDARDS (mg/1)	•
	Wastewater	All Other	Check All
F001-F005 Solvents	w/Solvents	Solvent Waste	That Apply
Acatone	0.05	0,59	
n-Butyl alcohoi	5.0	5.0	***************************************
Carbon disulfide	1.05	4.81	
Carbon tetrachloride	.05	.96	
Chlorobenzene	. 15	. 05 . 75	
Cresols (and cresylic acid)	2.82 .125	.75	<del></del>
Cyclohexanone	. 68	. 125	
1,2-dichlorobenzene	. 05	.75	
Ethyl acetate	.05	.053	
Ethyl benzene	.05	.75	
Ethyl ether	5.0	5.0	
Isobutanoi	, 25	. 75	
Methylene chloride	. 20	. 96	
Methylene chloride(from pharmaceutical industry)		". 96	
Methyl ethyl ketone	0.05	0.75	
Methyl isobutyl ketone	0.05	0.33	
Nitrobenzene	0.66	0.125	
Pyridine	1,12	0.33	**************************************
Tetrachloroethylene	0.079	0.05	<del></del>
Toluene	1.12	0.33	· ———
1, 1, 1 - Trichloroethane	1.05	0.41	
1,1,2-Trichloro - 1,2,2 trifluroethane	1.05	0.96	<del></del>
Trichloroethylene	0.062	0.091	
Trichlorofluoromethane	0.05	0.96	
Xylene	0.05	. 0.15	······································
		EPA	0503
Generator Name: JOHNSON CONTROLS		ID: <u>IND00954</u>	3333
	() 1		
Generator Representative Signature:	10/11/1	deck	
Geuerardi vehi ezettativa Diâtiarare	1 de personal de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia de la constantia del constantia del constantia del constantia del constantia del constantia de		
· · · · · · · · · · · · · · · · · · ·			
Name & Title of Representative:	y LEE HECK print or	type)	TURING ENGINEER
<i>'</i>	•		
068343		CONTROL	# 0047263

#### NOTICE OF LAND DISPOSAL RESTRICTION OF WASTE

EPA ID No.:

KYD053348108

SAFETY-KLEEN CORP STATE HWY 148 NEWCASTLE KY 40050

TO:

stricted and the EPA waste type and the appropriate R 268.41) are as follows:  (Enter F001, Fig. 1)	002, F003, F00	4 or F005)	
		STANDARDS (mg/	
NO.1 - EOOE Columnts	Wastewater w/Solvents	All Other Solvent Waste	Check All That Apply
001-F005 Solvents			
cetone	0.05	0.59	
-Butyl alcohol	5.0	5.0	<del></del>
arbon disulfide	1.05	4.81	
arbon tetrachloride	. 05	.96	
hlorobenzene	. 15	, 05	<del>~</del>
resols (and cresylic acid)	2.82	. 75	
vclohexanone	. 125	.75_	
2-dichlorobenzene	. 68	. 125	
thyl acetate	.05	.75	<del></del>
thyl benzene	. 05	.053	
thyl ether	. 05	. 75	
obutanol	5.0	5.0	
lethanol	. 25	.75	
lethylene chloride	. 20	, 96	
Methylene chloride(from pharmaceutical industry)	12.7	.96	
Methyl ethyl ketone	0.05	0.75	
Methyl isobutyl ketone	0.05	0.33	
litrobenzene	0.66	0.125	
****.T.F	1.12	0.33	
yridine etrachloroethylene	0.079	0.05	·
etracmoroethytene oluene	1.12	0.33	X
<del>=</del> :==::=	1.05	0.41	<u></u>
i,1,1-Trichloroethane i,1,2-Trichloro - 1,2,2 trifluroethane	1.05	0.96	
	0.062	0.091	
richloroethylene	0.05	0.96	
Frichlorofluoromethane	0.05	0.15	
(ylene	0.00	• • • • • • • • • • • • • • • • • • • •	
C Aleman JOHNSON CONTROL S		EPA (D: <b>IND0095</b>	49593
Generator Name: <u>JOHNSON CONTROLS</u>		k	<u>,</u>



#### DO NOT WRITE IN THIS SPACE

				_		
IT.	. :	DIS. 🗌	•	REJ.	. 🔲 🐪	PR.

Required under authority of Act 64, P.A. 1979, as amended and Act 136, P.A. 1969.

Failure to file is punishable under section 299.548 MCL or Section 10 of Act 136, PA, 1969.

Ple	ase print or					FOUT ADDRESS	: ,	
A	UN	IFORM HAZARDOUS	1. Generator's US	EPA ID No.	Manifest	2 Page 1	Information in	-0039 Expres 9-30 the shaded area
	3. Gen	WASTE MANIFEST erator's Name and Mailing Addre	I N DOO	9 5 4 9 5 9 3 <mark> </mark>	ocument No. 3  2  8  5  4		law,	red by Federa
1	JOHN:	SON CONTROLS - IN				A. State Ma	nifest Docume	ent Number
		E. MONROE ST.			; ;		13285	4
	4. Gen	EN IN 46526 219-53	3-2111	्र स्था अंदर्भ	• *		nerator's ID	
	15	sporter 1 Company Name	. <u> </u>	US EPA ID N	umber		nsporter's ID	
	Great	t Lakes Environmental :	Services M		181517141			813-758-04(
		sporter 2 Company Name	8.	US EPA ID N	umber	E. State Tra	nsporter's ID	Tagandan na makat
	9. Desi	ent Distillers, Inc.	M 10	I D 9 8 0 6 8	14 0 8 8	F. Transport	er's Phone 31	3-824-5840
	I	Chem Processing	iddress (U	US EPA ID N	umber	G. State Fac	cility's ID	
	421 I	Lycaste of the market			· 等。	L Coding	524 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	Detro	oit, MI 48214	LM S	[I]D[9]8]0]6]1	15/2/9/8		Phone	
	11. US E	OOT Description (including Proper	Shipping Name I	Hazard Class, and	12.Conta	iners 1	3. 14.	I. Waste
	HM	IĎ NUMB	ER).	· · · · · · · · · · · · · · · · · · ·	No.		otal Unit intity Wc∕Vo	No.
	. X	WASTE TRICHLOROETHY	ZT TO NITO					
		UN1710 ORM-A	LLENE		01.10		O. O	
	b.				אראט	ן (אולא גוו ה <mark> </mark>	91910 G	FOOD 1
ı	X	WASTE 111 TRICHLORG	DETHYLENE			An	a as Eth	
		ORM-A UN2831			alle	D IM OHOL	STAIL G	FIO 10 12
	C. X	WASTE METHYL ETHYL	KIRONE			ي ني		and sometime
		UN1193 FLAMMABLE	KETUNE		3		2 2 2	112
	d.					<u>ымаа</u>	IIIO G	F 10 10 15 1
	Х	WASTE ALCOHOL, N.O.	S. T		2	- 7. 📗 🗑		
		FLAMMABLE UN1987	<u>. 45</u>		005		11715 G	F 10 10 13
	J. Add	ditional Descriptions for Materials	Listed Above		· · · · · · · · · · · · · · · · · · ·	K. Handling	Codes for Was	
	Ъ. 1-A	APPROVAL #U11001	LAND BAN FOI	BM ATTACHED		Listed Abo	Ove 5-453	\$30 m
		PPROVAL #U11004						
		PPROVAC #J10999						c/ 3/3
	5 Spec	ial Handling Instructions and Ad	ditional Information		是 可以 一	· 1 · 1 · 2 · 3 · 4 · 4 · 5 · 4 · 4 · 5 · 4 · 4 · 5 · 4 · 4	· 本學達 (本)	<b>]</b> d/ 到
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	16, GENE	RATOR'S CERTIFICATION: I hereby declare shipping name and are classified nacked	e that the contents of t	this consignment are fully	and accurately d	escribed above	DV .	2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -
	्र ड्र accord	fing to applicable international and national	government regulation	and are in all respects in p ns.	roper condition i	for transport by	highway	
	≅ैंडीflam ∉ to be ∉	a large quantity generator, I certify that economically practicable and that I have	t I have a program in p	place to reduce the volum	e and toxicity o	f wäste genera	ted to the degree	e I have determine
	: preser	economically practicable and that I have nt and future threat to human health an ation and select the best waste mana	d the environment: O	H: if I am a small quantity	, 5151290, 61 (415)	bosar currently	available to me v od faith effort to	vhich minimizes tl minimize my was
I	3		geniant method that	is available to me and	that I can affo	ord.	: in	
	Printe	ed/Typed Name	1 2 3 8 5 3	Signature		10		- Date Month Day Ye
	17 Trans	Sporter 1 Acknowledgement of R	K	Emery	Der K	derk-		282189
		sporter 1 Acknowledgement of Red/Typed Name	eceipt of Materials	//	·		, j.	Date :
	21	Villiam P ( Vor	<b>√</b>	Signature /	1	09		Month Day Ye
	18. Trans	sporter 2 Acknowledgement or R		3 Call	lam 1	: by	ju ·	<u>ଠାୟା ସାଥା</u>
		ed/Typed Name		Signature			• •	Date Month Day Ye
			-		P			
	19. Discr	epancy Indication Space				· · · · · · · · · · · · · · · · · · ·		
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	20. Facili	ity Owner or Operator: Certification	of receipt of haza	rdous materials covere	ed by this mai	nifest excent	as noted to	
ļ					wy sone men	arceht	us noteu in	0
ĺ	Printe	ed/Typed Name		Signature				Date Month Day Ye
ļ	L Ecrop 07	00 22 /P 0:00:					!	
۴	- rum 8/	00-22 (Rev. 9/88) To be a	tailed by Mich	ngan DNR			garding garden	

To be chaded by

## LAND DISPOSAL RESTRICTED AND PROHIBITED WASTE WOTICE AND CERTIFICATION

TO: Petro-chem Processing, Inc. 515 Lycaste Detroit, MI 48214 MID 980615298

This shipment (Manifest Number: <u>MI 2/3 2854</u>) contains hazardous waste or treatment residues of a hazardous waste restricted or prohibited from land disposal under 40 CFR Part 268 Subpart C or Section 3004(d) of the federal Resource Conservation and Recovery Act of 1976, as amended, 42 USC 6901 et seq ("RCRA"), as indicated by an "X" below. This notification is included with the shipment as required by 40 CFR 268.7.

1. The following wastes are restricted from land disposal unless the concentration of their hazardous constituents is below the level specified in the associated treatment standard. The treatment standard may not be exceeded by the extract of a waste or an extract of a waste treatment residual. Concentrations must be determined using the test method in 40 CFR Part 268, Appendix A. 40 CFR 268.41(a). When wastes with different treatment standards for any constituent are combined for purposes of treatment, the treatment residue must meet the lowest treatment standard for that constituent 40 CFR 268.41(b).

1A. This shipment contains the following restricted F-solvent hazardous waste:

	Wastewater	✓ Non-Hastewater
Waste and Constituent Acetone (F003) — Butyl Alcohol (F003) — Carbon disulfide (F005) — Carbon Tetrachloride (F001) — Chlorobenzene (F002) — Cresols (and cresylic acid) (F004)	Wastewater Treatment Standard (mg/l) 0.05 5.0 1.05 0.05 0.15 2.82	Non-Hastewater Treatment Standard (mg/1) 0.59 5.00 4.81 0.96 0.05 0.75
Cyclohexanone (F003)  1, 2-Dichlorobenzene (F002)  Ethyl_acetate (F003)  Ethyl benzene (F003)  Ethyl ether (F003)  Isobutanol (F005)  Methanol (F003)	0.125 0.65 0.05 0.05 5.0 0.25	0.75 0.125 0.75 0.053 0.75 5.0 0.75

<pre>Methylene chloride</pre>	See Section 2A 0.20 0.05	0.96
Nitrobenzene (F004) Pyridine (F005) Tetrachloroethylene	0.05 0.66 1.12	0.33 0.125 0.33
(F001, F002) Toluene (F005) 1,1,1-Trichloroethane (F001, F002)	0.079 1.12	0.05 0.33
1,1,2-Trichloro-1,2,2- Trifluoroethane (F002) Trichloroethylene (F001, F002)	1.05	0.96
Trichlorofluoromethane (F002)Xylene (F003)	0.05 0.05	0.96 0.15
Source: 40 CFR 268.41(a); Table C	CCHE	
1B. This shipment contains waste:	the following K-	nonwastewater hazardous
K051, and K052 nonwastewa	ters	(mg/1)
		0.004 1.7 0.048 0.025
KO86 nonwastewaters (Solv Washes Subcategory)	ent	(mg/l)
Chromium (Total) Lead		0.094 0.37

E. T. Company (Browness) [

ll. I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that:

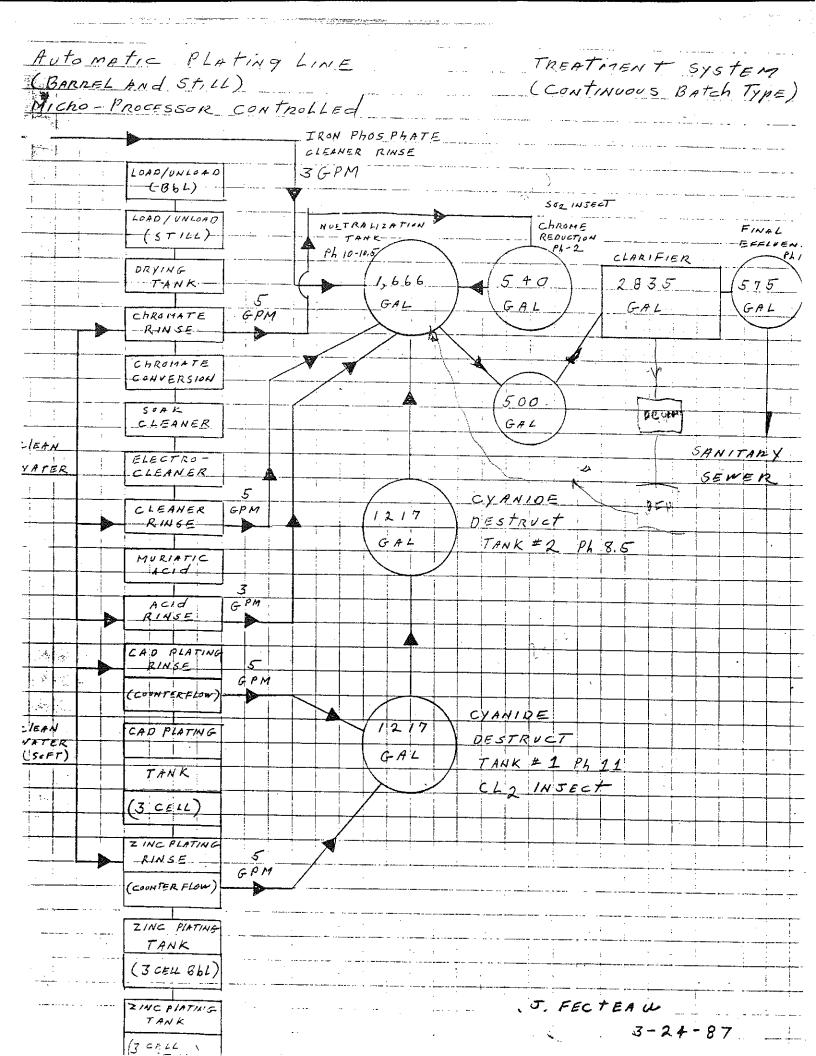
the waste does not comply with the treatment standards specified in 40 CFR Part 268 Subpart D or an applicable prohibition set forth in 40 CFR 268.32 or RCRA Section 3004(d).

the waste complies with the treatment standards specified in 40 CFR 268.32 or RCRA Section 3004(d).

I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment.

- Johnson Controls Ing
NAME OF GENERATOR
TND009549593 GENERATOR IDENTIFICATION NUMBER
GENERATOR IDENTIFICATION NUMBER
anery See Heck
SIGNATURE OF GENERATOR'S AUTHORIZED REPRESENTATIV
TITLE OF GENERATOR SCAUTHORIZED REPRESENTATIVE
TITLE OF GENERATOR'S AUTHORIZED REPRESENTATIVE
8/28/90
/ DIATE

C3048I



# DNR MCHIGAN DEPARTMENT ON NATURAL RESOURCES

EPA Form 8700-22 (Rev. 9/88)

or entireasien by

Sectional DEST

	DO	NOT	WRITE	IN	THIS	SPACE
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□ DIS. □ REJ. □ PR.ſ

Requi	red	under	aut	hori	ty o	1 Act	64.	PA.
1979.	as	amend	ed	and	Act	136.	PA.	
1969.								

Failure to file is punishable under section 299.548 MCL or Section 10 of Act 136, P.A. 1969.

Plea	se n	ort	ive	L AI	<u> </u>	DIS. 🗆	HEJ. L	PH			
	36 1	£	FORM HAZARDOUS	1. Generator	's US EPA		Manifest	2. Pa	n Approved. OMB No	. 2050-0039 Exp	
		_ <b>`</b> y	VASTE MANIFEST	INDO	0 9 5	4   9   5   9   3	Document N 5	^ i		required by	Federa
	Т.т	Gene	erator's Name and Mailing Addresson Controls	ss		***************************************			ate Manifest De	ocument Num	ber
	7		E. Monroe						11 11/5/	341	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	<sub>A</sub> G	oshe	en, IN 46526 219-533	-2111					ate Generator's		
	5.	Trans	sporter 1 Company Name		6.	US EPA ID N	Number		ate Transporter		· 特里特
	G	reat	Lakes Environmental	Services	MIT	D  0  8  7  4  US EPA ID 1	71 81 51 7		ansporter's Pho		8-04
			sporter 2 Company Name					E. St	ate Transporter	's ID-	- Marine
	9.	OLVE Desig	ent Distillers, Inc. gneted Facility Name and Site A	ddress	M T 10.	DI 9  8  0  6  US EPA ID 1	<u>8141 018</u>		nsporter's Pho		-584
			Chem Processing		. =		TOTAL CO.		tate Facility's II		
			ycaste	. :	•		•		acility's Phone		
			oit, MI 48214"		MIT	<u> 19 10 18 19 10 </u>	1 5 2 9	8 是	313-824-	5840	
	11.	US D	OT Description (including Proper ID NUMB	Shipping Na	me, Haza	rd Class, and	12.Cc	ntainers	13. Total	14. I. Was Unit No.	
G	а.	LINI	, a nemb	L11/.			No.	Туре	Quantity	Wt/Val	
N		х	Waste Trichloroethyl	ene .		-	<b>.</b>				
А			ORM-A UN1710				00		0101919	G FI O	n i i
Ť	b.										
R		Х	Waste 1,1,1 trichlor ORM-A UN2831	oethane S	stills		la i	. ا ح	00550		
	C.				<del></del>	<del></del>		DIM		G Flo	0[2]
	'	X	Waste Dichloromethan	ė	.*				- '		
		-	<u>OBM-A UN1593</u>	-						G F O	이길
	d.	х	WaSte Alcohol							- 20	164
			Flammable UN1987	•			00	J Di M	61160	G F <sub>1</sub> O <sub>1</sub>	01-3
	J.	Add	ditional Descriptions for Materials	s Listed Abov	/e		S. S. Andrews		andling Codes f	<u> </u>	, [ 潔]
	ā		/U11001	7.2				Lis Lis	sted Above		/ 報
	þ		/U11003					刺激			  · 梦
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1	15	Spec	ial Handling Instructions and Ad	ditional Infor	TACHED mation			A STATE		SERVICE U	
2			《養養養養養養養養養養養養養養養養養養養養養養養養養養養養養養養養養養養養養					475			
	16.	GENE	RATOR'S CERTIFICATION: I hereby decia	re that the conte	nts of this c	onsignment are full	y and accurat	ly describ	ed above by		
	4 2	accord	r shipping name and are classified, packed ling to applicable international and nation	z, marked, and la al government re	ibeled, and a gulations.	ire in all respects in	proper condi	ion for tra	nsport by highway	. # · . · .	• • •
	3 3	If I am	n a large quantity generator, I certify that economically practicable and that I hav	it I have a progr	am in place	to reduce the volu	me and toxic	ity of was	te generated to th	e degree   have o	determi
	4.	preser	nt and future threat to human health a ation and select the best waste man	nd the environm	nent; OR; if	ljam a small quant	tity generator	, I have m	ade a good faith e	effort to minimize	nimizes e my wa
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## LAND DISPOSAL RESTRICTED AND PROHIBITED WASTE NOTICE AND CERTIFICATION

TO: Petro-chem Processing, Inc. 515 Lycaste Detroit, MI 48214 MID 980615298

This shipment (Manifest Number: MI-1757377 )contains hazardous waste or treatment residues of a hazardous waste restricted or prohibited from land disposal under 40 CFR Part 268 Subpart C or Section 3004(d) of the federal Resource Conservation and Recovery Act of 1976, as amended, 42 USC 6901 et seq ("RCRA"), as indicated by an "X" below. This notification is included with the shipment as required by 40 CFR 268.7.

1. The following wastes are restricted from land disposal unless the concentration of their hazardous constituents is below the level specified in the associated treatment standard. The treatment standard may not be exceeded by the extract of a waste or an extract of a waste treatment residual. Concentrations must be determined using the test method in 40 CFR Part 268, Appendix A. 40 CFR 268.41(a). When wastes with different treatment standards for any constituent are combined for purposes of treatment, the treatment residue must meet the lowest treatment standard for that constituent 40 CFR 268.41(b).

1A. This shipment contains the following restricted F-solvent hazardous waste:

	Wastewater	✓ Non-Wastewater
Waste and Constituent Acetone (F003) n-Butyl Alcohol (F003) Carbon disulfide (F005) Carbon Tetrachloride (F001) Chlorobenzene (F002) Cresols (and cresylic acid) (F004)	Wastewater Treatment Standard (mg/1) 0.05 5.0 1.05 0.05 0.15 2.82	Non-Wastewater Treatment Standard (mg/1)  0.59 5.00 4.81 0.96 0.05 0.75
Cyclohexanone (F003)  1, 2-Dichlorobenzene (F002)  Ethyl acetate (F003)  Ethyl benzene (F003)  Ethyl ether (F003)  Isobutanol (F005)  Methanol (F003)	0.125 0.65 0.05 0.05 0.05 5.0	0.75 0.125 0.75 0.053 0.75 5.0

Machinitan			
Methylene chloride (pharmaceutical) Methylene chloride	See Section 2		
(FOO1, FOO2) (non-pharmaceutical) Methyl ethyl ketone	<u> </u>		96
(F005)  Methyl isobutyl ketone (F003)	0.05	0.7	75
Nitrobenzene (F004) Pyridine (F005) Tetrachloroethylene	0.05 0.66 1.12	0.:	125
(F001, F002) Toluene (F005) 1,1,1-Trichloroethane	0.079 1.12	0.0	
(F001, F002) 1,1,2-Trichloro-1,2,2-	1.05	<u> </u>	41
Trifluoroethane (FOO2)Trichloroethylene	1.05	0.9	96
(F001, F002)Trichlorofluoromethane	0.062	0.0	091
(F002) Xylene (F003)	0.05 0.05	0.9	
Source: 40 CFR 268.41(a); Table CC	CHE	·	
1B. This shipment contains waste:	the following i	C-nonwastewater	hazardous
K051, and K052 nonwastewat	ters	(mg/1)	
Arsenic Chromiun (Total) Nickel Selenium		0.004 1.7 0.048 0.025	
KO86 nonwastewaters (Solve Washes Subcategory)	ent	(mg/l)	
Chromium (Total) Lead		0.094 <b>0.3</b> 7	

11. I certify under penalty of law that I personally have examined and am familiar with the waste through analysis and testing or through knowledge of the waste to support this certification that:

the waste does not comply with the treatment standards specified in 40 CFR Part 268 Subpart D or an applicable prohibition set forth in 40 CFR 268.32 or RCRA Section 3004(d).

the waste complies with the treatment standards specified in 40 CFR Part 268 Subpart D and all applicable prohibitions set forth in 40 CFR 268.32 or RCRA Section 3004(d).

I believe that the information I submitted is true, accurate and complete. I am aware that there are significant penalties for submitting a false certification, including the possibility of a fine and imprisonment.

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# STATE OF ARKANSAS Department of Pollution Control and Ecology P. O. Box 9583 Little Rock, Arkansas 72219 Telephone 501-562-7444

(Form designed for use on elite (12-pitch) typewriter.)

Form Approved. OMB No. 2050-0039. Expires 9-30-91

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	16. GENERATOR'S CERTIFICATION: I hereby de packed, marked, and labeled, and are in all respect ass state regulations.  If I am a large quantity generator, I certify that I hav ticable and that I have selected the practicable me the environment; OR, If I am a small quantity get available to me and that I can afford.	s in proper condition for transport	by nighway according to a continuous and toxicity of W	aste generat	ed to the deg	ree I have deter	mined to be	economically prac- b human health and lent method that is
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I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.							
mitting false information, including the possibility of fine and imprisonment.							
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EPA I.D. Number in Item I above.  A. FIRST APPLICATION (place an "X" below and  1. EXISTING FACILITY (See instructions for	provide the appropriate	date)	, or it this is a revised application	on, enter your facility's
S VR. MO. DAY FOR EXISTING FACIL OPERATION BEGAN Coluse the boxes to the left	W.) LTIES, PROVIDE THE E PR THE DATE CONSTR ()	DATE (yr., mo., & day) UCTION COMMENCED		omplete item below.)  FOR NEW FACILITIES  PROVIDE THE DATE (yr., mo., & day) OPER;  TION BEGAN OR IS  EXPECTED TO BEGIN
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HI. PROCESSES — CODES AND DESIGN CAP. A. PROCESS CODE — Enter the code from the list of pentering codes. If more lines are needed, enter the code	Tools and a bull at	best describes each process	to he send at the facility.	
entering codes. If more lines are needed, enter the cidescribe the process (including its design capacity) in   B. PROCESS DESIGN CAPACITY — For each code en   1. AMOUNT — Enter the amount.  2. UNIT OF MEASURE — For each amount entered measure used. Only the units of measure that are	the space provided on the space provided on the space provided on the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the space of the	the capacity of the process	way man is not included in the !	ist of codes below, then
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LITERS PE	PER DAY OR R DAY OR LITERS	the space provided; Iten	TH-C.)	
UNIT OF MEASURE CODE  GALLONS	UNIT OF MEASURE	UNIT OF MEASURE CODE	UNIT OF MEASURE	UNIT OF MEASURE CODE
CUBIC YARDS. Y CUBIC METERS C GALLONS PER DAY  XAMPLE FOR COMPLETING ITEM III (shown in line) ther can hold 400 gailons. The facility also has an incir	LITERS PER DAY TONS PER HOUR METRIC TONS PER HOUR GALLONS PER HOUR. Inters PER HOUR. Inters PER HOUR. Inters PER HOUR. Inters PER HOUR. Inters PER HOUR. Inters PER HOUR.	10UR	ACRE-FEET. HECTARE-METER. ACRES. HECTARES  storage tanks, one tank can ho	· · · · · · · · · · · · · · · · · · ·
DUP 1/4 S			111111	1111
B. PROCESS DESIGN CAPAC			PROCESS DESIGN CAPAC	:ITY
CESS CODE (from list above)	2. UNIT OFFICIAL USE (enter code)	M CESS CODE Code Code Code Code Code Code Code Code	1. AMOUNT	2. UNIT OF MEA SURE (enter (code)
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704 5000		9		
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S 0 1 1 15 27 PA Form 3510-3 (6-80)	PAGE	19 - 15 ta		25 25 3

C. SPACE FOR ADDITIONAL PROCESS CODES OR J'OR DESCRIBING OTHER PROCESSES (code "T04"). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

The following is a brief description of our Treatment System for teasting Electroplating Waste.

- Cyanide Rinses are treated in a flow threagh batch two tank system. Chlorine gas is injected into a 1100 gal. tank at a PH of 11, elapsed time in this tank is 3.9 hours. Waters then flow to second 1100 gal. tank where PH is dropped to 8.2 -8.5, elapsed time in second tank is 3.9 hours, waters then flow to a neutralization tank.
- Chromic Acid Rinses are treated in a flow through batch two tank system. Sulfur Dioxide gas is injected into a 700 Gal. sank at a PH of two, elapsed time in this tank is 3.9 hours. Waters then flow to second 700 gal. tank where the PH is raised to 8.2 - 8.5, elapsed time in we cond tank is 3.9 hours. Waters then flow to a neutralization tank.
- Neutralization Tank capacity is 7000 gal. and PH is controlled at 8.2 8.5 elasped time in tank is 4.8 hours. Waters flow from neutralization tank to a deep bed filter. (All other biodegradable rinses flow directly into this tank)

Uses 15 micron filter paper with automatic paper advance. Paper and sludg Bed Filter IV. DESCRIBILIANO FINA DARDONS. WALESTON

- A. EPA HAZARDOUS WASTE NUMBER Enter the four-digit humber from to Ciric, Supplied for each listed hizardous waite you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous westes,
- B. ESTIMATED ANNUAL QUANTITY -- For each listed wests entered in column A satimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste/s/ that will be handled which possess that characteristic or contaminant.
- C. UNIT OF MEASURE For each quantity entered in column 8 enter the unit of measure code. Units of measure which must be used and the appropriate

ENGLISH UNIT OF MEASURE	CODE	METRIC UNIT OF MEASURE	CODE
POUNDS		KILOGRAMS	
TONS	<b>T</b>	METRIC TONS	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste,

#### D. PROCESSES

1. PROCESS CODES:

For listed hazardous wests: For each listed hazardous waste entered in column A select the code/af from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code/s/ from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used; describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER - Hezardous wester that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

- 1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B.C. and D by estimating the total annual
- quantity of the waste and describe set the processes to be used to treat, store, and/or dispose of the waste.

  In column A of the next line and eacher EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and the process to the time.

  Repeat step 2 for each other.

EXAMPLE FOR COMPLETING IT Science in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from limits and finishing operation. In addition, the facility will treat and dispose of three non—listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treasment will be in an incinerator and disposal will be in a landfill.

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ZÖ	W	/A	<b>5</b> T	EN	10	QUANTITY OF WASTE	17	en te	E.				1.	PR		ES:		) () E	<b>.</b>	, ,	2. PROCESS DESCRIPTION (if a code is not entered in D(I))
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<b>X-</b> 2	Z		0	0	2	400		P	-	T	T 0	) 3	L	T ) {	8 0	7	<b>T</b>	7	+	ਦੇ ਿ	The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s
л <u>-</u> 3	I	7	0	0	1	100	$\dagger$	P	-	T	0	3	L	) }	3 0	<del>기</del>	T	T	+	<del>  }  </del>	1 2015
X-4	1	P	0	0	2			T			1	1		Т	T	+	<del>- 1</del>	T		γ.	included with above

Harry A. Mihm
EPA Form 3510-3 (6-80)

A. NAME (print or type)

PA 5 4 OF 5

B. SIGNATURE

CONTINUE ON PAGE 5

C. DATE SIGNED

#### WijO. ŋ RCRA

HAZARDOUS WASTE PERMIT APPLICATION EPA I.D. NUMBER Consolidated Permits Program (This information is required under Section 3005 of RCRA.) FOR OFFICIAL USE ONLY APPROVED (NE MO. & day) رومك تئي COMMENTS II. FIRST OR REVISED APPLICATION Place an "X" in the appropriate box in A or B below imark one box only) to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above. A. FIRST APPLICATION (place an "X" below and provide the appropriate date) 1. EXISTING FACILITY (See instructions for definition of "existing" facility,
Complete item below.) 2.NEW FACILITY (Complete item below.) FOR NEW FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR IS EXPECTED TO BEGIN FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED (use the boxes to the left) 8 REVISED APPLICATION (place an "X" below and complete Item I above) 1. FACILITY HAS INTERIM STATUS 2. FACILITY HAS A RCRA PERMIT III. PROCESSES – CODES AND DESIGN CAPACITIES A. PROCESS CODE - Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code/s/ in the space provided. If a process will be used that is not included in the list of codes below, then describe the process (including its design capacity) in the space provided on the form (Item III-C). B. PROCESS DESIGN CAPACITY - For each code entered in column A enter the capacity of the process. AMOUNT — Enter the amount. 2. UNIT OF MEASURE - For each amount entered in column 8(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used. PRO-APPROPRIATE UNITS OF PRO-APPROPRIATE UNITS OF CESS MEASURE FOR PROCESS CESS MEASURE FOR PROCESS PROCESS DESIGN CAPACITY PROCESS CODE DESIGN CAPACITY Storege: Treatment: CONTAINER (barrel, drum, etc.) GALLONS OR LITERS TANK TOI GALLONS PER DAY OR GALLONS OR LITERS CUBIC YARDS OR CUBIC METERS GALLONS OR LITERS 502 503 GALLONS PER DAY
LITERS PER DAY
GALLONS PER DAY OR
LITERS PER DAY
TONS PER HOUR OR
METRIC TONS PER HOUR;
GALLONS PER HOUR OR WASTE PILE SURFACE IMPOUNDMENT T02 SURFACE IMPOUNDMENT INCINERATOR TO3 Disposal: INJECTION WELL GALLONS OR LITERS
ACRE-FEET (the volume that
would cover one agre to a
depth of one foot) OR LITERS PER HOUR LANDFILL OTHER (Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.) D80 GALLONS PER DAY OR LITERS PER DAY HECTARE-METER LAND APPLICATION ACRES OR HECTARES GALLONS PER DAY OR LITERS PER DAY OCEAN DISPOSAL SURFACE IMPOUNDMENT GALLONS OR LITERS 1000 A STATE OF STATE OF UNIT OF UNIT OF UNIT OF **MEASURE MEASURE UNIT OF MEASURE** CODE UNIT OF MEASURE MEASURE CODE UNIT OF MEASURE CODE LITERS PER DAY . . . . . . . . . . . . . . . . V TONS PER HOUR . METRIC TONS PER HOUR. . . . . . . . W ACRES. CUBIC METERS GALLONS PER HOUR . . . . . . . . . E . . . . . . . . . . . **c** HECTARES....... GALLONS PER DAY ....... EXAMPLE FOR COMPLETING ITEM III (shown in line numbers X-1 and X-2 below): A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour. DUP 13 14 115 B. PROCESS DESIGN CAPACITY A. PRO B. PROCESS DESIGN CAPACITY 2 A. PRO CESS FOR CESS 2. UNIT FOR CODE OFFICIA 2, UNIT Σ OFFICIAL S AMOUNT ... SE CENT (from lui (specify) 1. AMOUNT SURE (enter USE from list USE SURE abavej ONLY above) (enter ONLY codel 2.0 502 600 G 5 ξ. 0 3 T $\boldsymbol{E}$ 6 7 S 0 1 10,560 G 2 8 3 9

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I. PROCESSES (contin SPACE FOR ADDITION INCLUDE DESIGN CAP)	AL PROCESS CODES OR FOR	DESCRIBING OT	HER PROCESS	ES (code "T04").	FOR EACH PRO	CESS ENTER	EDHEHE
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TA	V. DESCRIPTION OF HAZARDOUS WASTES  EPA HAZARDOUS WASTE NUMBER — Enter the four-qigit number from 40 CFR, Subpart D for each listed nazardous waste which are not listed in 40 CFR, Subpart D, enter the four-qigit number (from 40 CFR).
	handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four—digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those nazardous wastes.
8.	ESTIMATED ANNUAL QUANTITY — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annument of each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.
C.	UNIT OF MEASURE — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriations are:
!	ENGLISH UNIT OF MEASURE CODE METRIC UNIT OF MEASURE
	POUNDSP METRIC UNIT OF MEASURE CODE TONS

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into 

#### D. PROCESSES

1. PROCESS CODES:

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For fisted hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to Indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess

Note: Four spaces are provided for entering process codes, if more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

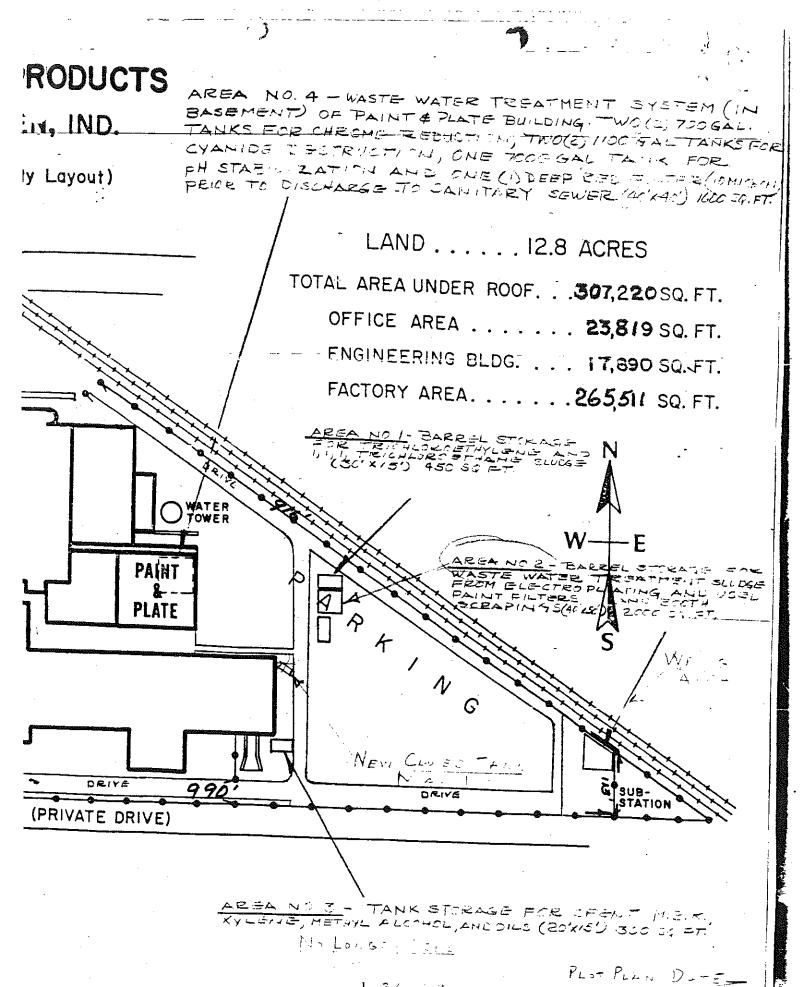
NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER - Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B,C, and D by estimating the total annual quantity of the weste and describing all the processes to be used to treat, store, and/or dispose of the waste. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter

3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposel will be in a landi

H O	Ŀ	fA:	EP Z A .	₹D.	D. B ESTIMATED AND A		ESTIMATED ANNITAL OF MEA-			D. PROCESSES								
= 0 Z				NO de)		7	enter code)				1, P	RO	ÇE! (en	SS Ci ter)	DDE	5		2. PROCESS DESCRIPTION (if a code is not entered in D(1))
X-1	F		) 5	4	900		P	Т	0	3	D	8	0	1	I	T	1	
<b>K-2</b>	L	20	0	2	400		P	T	0	3	D	8	0	- 1	Τ-	+	<del>-1-</del>	
X-3	L		0	I	100	$\top$	P	T	0	1	D	<u> </u>			1	-	1	
X-4	1		) (	2	·	_		,	Υ		-			Ţ	1	-	η-	included with above



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per yea are cor	PLE 1 ir of a rosive	FOR C throme only	OMPLETING ITEM IV (shown in	<i>lini</i> d fi	e num nishing	bers X-1, X g operation	. In add	and X-4 be lition, the fa	low) — A fac cility will tre	ility wi	It treat and dispose of an estimated 900 pounds dispose of three non—listed wastes. Two wastes sive and ignitable and there will be an estimated
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EPA Form 3510-3 (6-80)	5 36 27 - 29 27 - 29 27 -	
C. C. (1111 22 10-2 10-00)		CONTINUE ON REVES

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C. DESCRIPTION OF HAZARDOUS WASTES  E. USE THIS SPACE TO LIST ADDITIONAL	tinuc di	
2. COL THIS STREET TO EIST ADDITIONAL	JCESS CODES FROM ITEM D(1) ON PAGE	
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V. FACILITY FRONING	The state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the s	
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VIII. FACILITY OWNER		72 72 76 77 75
A. If the facility owner is also the facility operator as	s listed in Section VIII on Form 1, "General Information	" place and YY" in the incurrent the later
ry dito Section IX below.		, place an X III the box to the left and
B. If the facility owner is not the facility operator as	listed in Section VIII on Form 1, complete the followin	g items:
	ILITY'S LEGAL OWNER	
		2. PHONE NO. (area code & no.)
E JOHNSON CONTROLS, INC.		414-276-9200
3. STREET OR P.O. BOX	4. CITY OR TOWN	55 56 - 58 59 - 61 62 - 76 5. ST. 6. ZIP CODE
F. 507 E. Michigan St.	G Milwaukee	77 7 7 7 7
	35 15 15	<u>                                      </u>
IX. OWNER CERTIFICATION	And the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of the state of t	
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- such stad imormation is true, accurate, and compl	ete. I am aware that there are significant penalties	for submitting false information.
musue ng the possibility of time and imprisonment,		,
A. NAME (Print or type)	B. SIGNATURE	C. DATE SIGNED
Harold L. Brooks	1 Ma- 819 15 1 m Rs	10-27-80
X, OPERATOR CERTIFICATION	1 / / war y / w / capter	10-67-30
I certify under penalty of law that I have personally documents, and that based on my inquiry of those	r examined and am familiar with the information individuals immediately responsible for obtaining	submitted in this and all attached
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i. July the possibility of fine and imprisonment.		
A. NAME (print or type)	B. SIGNATURE	C. DATE SENED
Harry A. Mihm	De Co Santi D	18/97/0x

EPA Form 3510-3 (6-80)

PAGE 4 OF 5

CONTINUE ON PAGE

### SEP 12 9 03 AM '88

Eastern 6, 4980

JOHNSON
CONTROLS
Control Products
Division

Indiana Dept. of Environmental Mgt. Office of Solid & Hazardous Waste Mgt. 105 S. Meridian Street P.O. Box 6015 Indianapolis, IN 46206-6015

Attn: Ms. Jayne Browning

RE: PART "B" PERMIT APPLICATION JOHNSON CONTROLS, INC. GOSHEN, IN 46526 IND009549593

Dear Ms. Browning:

This letter is notification that Johnson Controls, Goshen, Indiana, INDO09549593 will be submitting a transfer of its hazardous waste management unit in accordance with 329IAC 3-21 with the intent of transfer of the large partial generator.

The Part "A" issued to Johnson Controls on November 3, 1980 was revised on April 11, 1987, to reflect "active portion" of facility as storage (SO1) only. See enclosed Part "A" and notice of compliance letter dated September 25, 1987, (case no. V-427).

under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under the second (TO4) listed on original Part "A" under

The took of a hazard waste.

Sincerely,

JOHNSON CONTROLS, INC.

John & Factione John 6. Fecteau C.H.M.H.

J6F: MJK

Johns Controls, Inc.
Control oducts Division
1302 East Monroe Street
Goshen, IN 46526-4297
Tel. 219/533-2111

Elkhall 10

# FEB 6 9 39 AH '89

JAHNSON CONTROLS January 30, 1989

Thomas E. Linson, Chief Plan Review and Permit Section Hazardous Waste Management Branch Solid and Hazardous Waste Management

#### ·Dear Mr. Linson:

I am responding to your letter of January 17, 1989 to John G. Fecteau of Johnson Controls, as Mr. Fecteau has left Johnson Controls for employment with another firm.

The partial plot drawing, which is referred to as a survey, is not a May 1, 1974 survey as dated in the lower right hand corner. The survey notes were added to a portion of a Goshen facility plot drawing which was dated 5/1/74. You were correct in assuming that the hazardous waste units were penciled in at a later date. The 5/1/74 date should have been removed.

#### Area No. 1

The old building was a wood frame structure which was moved from the property in November of 1980. There was no soil removed and no analytical testing, as the purpose was to remove the building and the adjacent metal building to construct one new storage building.

The old buildings had dirt floors and were used to park vehicles, store softener salt, and palatalized drums which had no known records of spillage.

#### Area No. 2

Unfortunately the arrow for Area No. 2 points to a wrong location. Area No. 2 is the South part and adjacent to Area No. 1. Area No. 1 and No. 2 are all part of and under one roof in the building which replaced the two structures in November of 1980. There have been no known releases in Areas No. 1 or 2.

Area No. 2, referenced on our partial plot drawing and the copies of photos, is actually a catch all corner of our property. There are pieces of field tile, manhole rings fencing, structural steel, etc. in the area.

The new building is used as a dual purpose building to store a tractor, softener salt, and drums of waste. The building has a concrete floor with the drum section having a curbed perimeter and no drains in order to contain any spills. To date we have had no known spills.

#### Area No. 3

The tank referred to in Area No. 3 was a 1500 gallon steel tank with a sliding cover. The tank has been in use since 1974 and we have had no known releases from the tank. The tank was replaced with a closed tank in May of 1988 as we were beginning to get trash thrown into the tank. The new tank has a pipe fill which has eliminated the possibility of dumping trash into the tank. This tank is not used for spent M.E.K., xylene, or methyl alcohol.

Sincerely,

JOHNSON CONTROLS, INC.

Joseph H. McCorkel

Plant Engineering Manager

Joseph H. M. Corkel

JHM:MJK linson

cc: D. F. DeLay

Steve Hunter, IDEM

## SANDERS AVE. ISTH STREET SHADED AREA : 1.54 ACRES EGBERT AVE. MONROE STREET (4) HOMES J 268 $\overline{\mathcal{A}}$ Z H 9078 G I6TH STREET - FACTORY ENTRANCE FACTORY OFFICE PENN PRODUCTS EGBERT AL (PRIVATE DRIVE) (Propety Layout) GOSHEN, IND. TOTAL AREA UNDER ROOF. . . 307,220 SQ. FT. FACTORY AREA. . ENGINEERING BLDG. OFFICE AREA ... , 12.8 ACRES . 265,511 SQ. FT. . 17,890 SQ. FT. 25,819 SQ. FT.